## 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

Subm	nission Identification Number (SID)				
Taxpay	rer's name	Social securit	y number		
SIV	A KUMAR SRI SAI PULAVARTHY	482-45-	-5580		
Spouse	o's name	Spouse's soc	ial security r	number	
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re author	izing.)	—
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		1	7,41	9.
2	Total tax		2		0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		6.
4	Amount you want refunded to you		4		6.
5	Amount you owe		5	4	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and ke penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
to senfor any Agent payme author payme busine taxes persor	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution required in the unit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the particular of the income tax return (original or amended) I around the propriet of the propriet	ection of the tr S. Treasury and cated in the taken to debit the the authorizatests must be processing of ayment. I furt	ansmission and its design and its design and preparation and p	, (b) the rea nated Finar ion software s account. voke (cancount) no later tha onic paymer vledge that	ason ncial e for This el) a an 2 nt of
	ayer's PIN: check one box only				
	I authorize GLOBAL TAXES LLC to enter or generate it	my DINI 5	5 5 8		my
_	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits 1't enter all 2	s, but	iiiy
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Your	signature ► Date ► 2	5th March 20	023		
Spou	se's PIN: check one box only				
	I authorize to enter or generate r	_			my
	ERO firm name		er five digits 1't enter all 2		
	signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN method.	ow authorizir	ng. Check	this box c	
	below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	Don't ente	er all zeros		
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income ta rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm rements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in accor	dance with	
EBO'	s signature ▶ Date ▶				
ENU :	ERO Must Retain This Form — See Instructions				—

Don't Submit This Form to the IRS Unless Requested To Do So

# E 1040-NR Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2022

OMB No. 1545-0074

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

For the year Ja	ın. 1–[	Dec. 31, 2022, or other tax year begi	nning	, 2022,	ending	:	20	See separate instructions.
Filing Status		Single Married filing se	. , ,	,	ng surviving spouse	` '	Est	ate Trust
Check only one box.				ne if the qualifying persoi	·	·		
Your first name	e and	middle initial	Last na	ame				entifying number tructions)
SIVA KUM	AR S	SRI SAI	PULA	VARTHY			482-	45-5580
Home address	(num	ber and street). If you have a P.O. b	ox, see ins	structions.				Apt. no.
7330 PAR	KRID	GE BLVD			39			
City, town, or p	ost o	ffice. If you have a foreign address,	also comp	lete spaces below.		State		ZIP code
IRVING						TX		75063
Foreign countr	y nam	e	Foreign	n province/state/county		Foreign	postal cod	de
Digital Asset		ny time during 2022, did you: (a) receivise dispose of a digital asset (or						exchange, gift, or
Dependents	s					(4) Ch	eck the box	if qualifies for (see inst.)
(see instructions		(1) First name Last nam	20	(2) Dependent's identifying number	(3) Relationship to y	Ch	ild tax credi	t Credit for other
		(I) I i st Hame Last Ham	16	lacitalying hamber	(3) Helationship to y	ou		dependents
If more than fou	r							
dependents, see							$\overline{}$	
instructions and check here								
Income	1a	Total amount from Form(s) W-2, b	ov 1 (coo i	netructions)			. 1a	7,419.
Effectively	b	Household employee wages not r	,	,				7,113.
Connected	c	Tip income not reported on line 1						
With U.S.	d	Medicaid waiver payments not re						
Trade or	e	Taxable dependent care benefits		( )	,			
Business	f	Employer-provided adoption bene					. 1f	
Dusiness	g g	Wages from Form 8919, line 6.		·				
Attach	h	Other earned income (see instruction						
Form(s) W-2, 1042-S,	i	Reserved for future use						
SSA-1042-S,	i	Reserved for future use					. 1j	
RRB-1042-S,	k	Total income exempt by a treaty f	rom Sched	lule OI (Form 1040-NR), i	tem L.			
and 8288-A here. Also								
attach	z	Add lines 1a through 1h					. 1z	7,419.
Form(s) 1099-R if	2a	Tax-exempt interest	2a	<b>b</b> Tax	cable interest		. 2b	
tax was	3a	Qualified dividends	3a	<b>b</b> Ord	dinary dividends .		. 3b	
withheld.	4a	IRA distributions	4a	<b>b</b> Tax	able amount		. 4b	
If you did not	5a	Pensions and annuities	5a	<b>b</b> Tax	able amount		. 5b	
get a Form W-2, see	6	Reserved for future use					. 6	
instructions.	7	Capital gain or (loss). Attach Sche	•		•			
	8	Other income from Schedule 1 (Fo						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, an	d 8. This is	s your <b>total effectively o</b>	onnected income		. 9	7,419.
	10	Adjustments to income:						
	а	From Schedule 1 (Form 1040), line						
	b	Reserved for future use						
	С	Reserved for future use						
	d	Enter the amount from line 10a. T	-	=				
	11	Subtract line 10d from line 9. This	-					7,419.
	12	<b>Itemized deductions</b> (from Schededuction (see instructions)	,	**		dia, standa .US/India.Tr	l l	12,950.
	13a	Qualified business income deduct	tion from F	orm 8995 or Form 8995-	-A . <b>13a</b>			
	b	Exemptions for estates and trusts	only (see i	instructions)	13b			
	С	Add lines 13a and 13b					. 13c	
	14	Add lines 12 and 13c						12,950.
	15	Subtract line 14 from line 11. If ze	ro or less	enter -0 This is your ta	xable income		. 15	0.

Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): <b>1</b> 🗌 8	814 <b>2</b> 🗌 497	2 3 🗌	16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line	3			17	0.
	18	Add lines 16 and 17				18	0.
	19	Child tax credit or credit for other dependent	ents from Sched	ule 8812 (Form 104	10)	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 les	s, enter -0			22	0.
	23a	Tax on income not effectively connected v	vith a U.S. trade	or business from			
	b	Schedule NEC (Form 1040-NR), line 15 Other taxes, including self-employment ta			23a		
	b	line 21	•	, , , , , , , , , , , , , , , , , , , ,	23b		
	С	Transportation tax (see instructions) .			23c		
	d	Add lines 23a through 23c				230	1
	24	Add lines 22 and 23d. This is your <b>total ta</b>					
Dovmonto	25	Federal income tax withheld from:			<u> </u>	27	0.
Payments	a	Form(s) W-2			25a	6.	
						0.	
	b	Form(s) 1099			25b		
	C	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c					
	е	Form(s) 8805					
	f	Form(s) 8288-A					
	g	Form(s) 1042-S				<del></del>	
	26	2022 estimated tax payments and amount				26	
	27	Reserved for future use			27		
	28	Additional child tax credit from Schedule 8	3812 (Form 1040	)	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 t	otal other paym	ents and refunda	ble credits	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32.	These are your <b>t</b> o	otal payments .		33	6.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33.	This is the amoun	t you <b>overpaid</b>	34	6.
	35a	Amount of line 34 you want refunded to y	ou. If Form 8888	3 is attached, chec	k here	. 🗌 35a	a 6.
Direct deposit?	b	Routing number 1 1 1 0 0 0	0 2 5	c Type: 🛛	Checking :	Savings	
See instructions.	d	Account number 4 8 8 1 0 3					
	е	If you want your refund check mailed to a					
	00	enter it here.					
A	36	Amount of line 34 you want applied to yo			36		
Amount	37	Subtract line 33 from line 24. This is the <b>a</b> ll For details on how to pay, go to www.irs.g	-			0.7	
You Owe	38	Estimated tax penalty (see instructions)	-	1	38	37	
Third		u want to allow another person to discuss t				s. Complete b	pelow. 🛛 No
Party	,	'					
Designee	Desigi name		Phone no.		Persor numbe	ial identificatio	'n
zooigiioo	Under	penalties of perjury, I declare that I have examine	d this return and a		les and statements	, and to the bes	
Sian		they are true, correct, and complete. Declaration			d on all information		, ,
Sign	Yours	signature	Date	Your occupation			sent you an Identity n PIN, enter it here
Here		1					
	Phone	2.00	Email address	SOFTWARE DEVEL	OTHERT DIRECTIVE	TIV   (SCC IIISL)	<u> </u>
			's signature		Date	PTIN	Check if:
Paid	Пора	. s. sams	- orginaturo				Self-employed
Preparer	Elward.					Dhamair	☐ Gell-employed
Use Only	Firm's name GLOBAL TAXES LLC Phone n						
-	rirm's	address 245 ROONEY CT E BI	KUNSWICK N	J 08816_		Firm's EIN	

Form 1040-NR (2022)

#### **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

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

2022	
Attachment Sequence No. <b>7B</b>	

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number SIVA KUMAR SRI SAI PULAVARTHY 482-45-5580

Enter	amount of income und	er the appropriate rate of tax. See instructions.					1	(al) Othor	· (anaaifu)	
	Nature of Income				(a) 10% (b) 15%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)		
_	Dividends and divide	and a surfice leader						%	%	
1	Dividends and divide	•		4.						
a	Dividends paid by U.	·		1a						
b		reign corporations		1b						
С				1c						
2	Interest:									
а				2a						
b		orations		2b						
С				2c						
3	Industrial royalties (p	atents, trademarks, etc.)		3						
4	· ·	copyright royalties		4						
5		rights, recording, publishing, etc.)		5						
6		e and natural resources royalties		6						
7	Pensions and annuiti	es		7						
8	Social security benef	iits		8						
9										
10	6 Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0									
а	Winnings									
b	<b>b</b> Losses			10c						
11	Note: Losses not allo	Residents of countries other than Canada.		11						
12	Other (specify):									
				12						
13	Add lines 1a through	12 in columns (a) through (d)		13						
14		ate of tax at top of each column		14						
15	Tax on income not e	ffectively connected with a U.S. trade or busine						-NR, line 23a <b>15</b>		
		Capital Gains an	d Losses I	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 effectively connected with a U.S. business. Do not include a gain		(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).	
or loss	on disposing of a U.S. real									
property interest; report these gains and losses on Schedule D										
(Form 1	•									
	property sales or ges that are effectively									
connec	ted 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	r -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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attachment Sequence No. **7C** Answer all questions. Your identifying number

Name sl	nown on Form 1040-NR				Your identifying	number				
SIVA	IVA KUMAR SRI SAI PULAVARTHY 482-45-5580									
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 residen	t) of 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 Un	ited States?			☐ Yes	⊠ No			
	If you answer "Yes" to (1) or (2	), see Pub. 519, chapter 4,	for expatriation ru	les that apply to you.						
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax yearF1									
F	Have you ever changed your v If you answered "Yes," indicat		tus) or U.S. immig			☐ Yes	⊠ No			
G	List all dates you entered and	eft the United States durin	g 2022. See instru							
	Note: If you're a resident of C	anada or Mexico AND cor	nmute to work in	the United States at frequ	ent intervals,					
	check the box for Canada or	Mexico and skip to item H	1	🗌 Canada	☐ Mexico					
	Date entered United States	Date departed United State	es	Date entered United State	es Date depa	rted United	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy				
Н	Give number of days (including									
	2020	, 20211	56 , and	d 2022365	· · · ·	<b>S</b>				
1	Did you file a U.S. income tax	return for any prior year?.				X Yes	∐ No			
	If "Yes," give the latest year ar	a form number you filea:		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 inf	ormation on tax tr	reaties.	-	_	-			
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the			
	<b>(a)</b> Cou	ntry	(b) Tax treaty arti			ount of exe				
				claimed in prior tax ye	ears income in	n current ta	ax year			
	(a) Total Enter this amount of	Form 1040 ND line 11: D	o not onter it are:	where also on line 1						
2.	<b>(e) Total.</b> Enter this amount of Were you subject to tax in a fo		-			Yes	□No			
	Are you claiming treaty benefit					☐ Yes				
٥.	If "Yes," attach a copy of the (		=			₩ 162	□ NO			
М	• • •	competent Authority determ	ппаноп тепет то у	oui ietuiii.						
	Check the applicable box if: This is the first year you are many and the state of t			-		-	onnect <u>ed</u>			
_	with a U.S. trade or business u	, ,								
2.	You have made an election in States as effectively connected									
	Otates as effectively confidence	a with a 0.5. Haue of busin	cos unuel section	i or i(u). See ilistructions .			· <u> </u>			