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

Submi	ssion Identification Number (SID)		-		
Taxpaye	er's name	Social securi	y numl	per	
SAI	KUMAR REDDY ALAVALA	661-68	-497	7	
Spouse'	's name	Spouse's soc	ial seci	urity numb	per
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r year you a	re au	thorizin	g.)
	whole dollars only on lines 1 through 5.	, , , , , , , , , , , , , , , , , , ,			<u> </u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	4	9,224.
2	Total tax		2		4,148.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		6,441.
4	Amount you want refunded to you		4		2,293.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our ret	turn)
to send for any Agent t paymen authoriz paymen busines taxes t persona	foriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transiful my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the loo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into finy federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recess days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I	ejection of the true. U.S. Treasury a dicated in the training to debit the tet the authoriza quests must be processing of payment. I further the treatment of the processing	ansmised ax preparties of the elements of the	ssion, (b) designate paration s to this ac fo revoke ved no la ectronic knowled	the reason of Financial oftware for count. This e (cancel) a ater than 2 payment of ge that the
	nic Funds Withdrawal Consent.				7
	yer's PIN: check one box only	8	4	9 7 7	
×	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	ž En		digits, but	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	3
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your s	ignature ▶ Date ▶				
Snous	se's PIN: check one box only				
Spous	I authorize to enter or generate	my DIN			as my
	ERO firm name	_	er five	digits, but	_ ,
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belov	v			
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.		6 6	1 9	8 9
		Don't ent	er all z e	eros	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income 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 <i>e-file</i> Providers of	mitting this retu	ırn in a	accordan	ce with the
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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

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OMB No. 1545-0074

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

For the year Ja	n. 1–C	Dec. 31, 2022, or other tax year begin	inning	, 2022,	ending	:	, 20		See separate nstructions.
Filing Status		Single Married filing se		•	ng surviving spouse			tate	☐ Trust
Check only one box.				. , , , ,					
Your first name	and i	middle initial	Last na	ame			Your id	-	ing number ons)
SAI KUMA	R RE	DDY	ALAV	ALA			661-	-68-4	4977
Home address	(numl	ber and street). If you have a P.O. b	ox, see ins	structions.					Apt. no.
4335 WALL	TUI	GROVE LN N							
City, town, or p	ost of	ffice. If you have a foreign address,	also comp	lete spaces below.		State		ZIP co	ode
PLYMOUTH						MN		554	46
Foreign country	y nam	е	Foreigr	n province/state/county		Foreign	postal co	de	
Digital Assets		ny time during 2022, did you: (a) reerwise dispose of a digital asset (or					or (b) sell,		nge, gift, or Yes 🔀 No
Dependents	6					(4) Ch	neck the bo	x if qual	lifies for (see inst.):
(see instructions)	:	(1) First name Last nar	ne	(2) Dependent's identifying number	(3) Relationship to	you Chi	ild tax cred	it '	Credit for other dependents
If mare then form									
If more than four dependents, see							<u> Ц</u>		<u> </u>
instructions and							<u> </u>		
check here							Ц_		<u> </u>
Income	1a	Total amount from Form(s) W-2, b	•	,					49,224.
Effectively	b	Household employee wages not r	-	* *					
Connected	С	Tip income not reported on line 1	`	,					
With U.S.	d	Medicaid waiver payments not re		` ' ` `	,				
Trade or e Taxable dependent care benefits from Form 2441, line 26								_	
Business	f	. ,		•					
Attach	g	Wages from Form 8919, line 6.							
Form(s) W-2,	h i	Other earned income (see instruction Reserved for future use	,				. 1h		
1042-S, SSA-1042-S,		Reserved for future use					. 1j		
RRB-1042-S,	k	Total income exempt by a treaty f			1 1		. ,,		
and 8288-A here. Also	ĸ								
attach	z	Add lines 1a through 1h					. 1z		49,224.
Form(s)	2a	Tax-exempt interest	2a	1	xable interest				
1099-R if tax was		Qualified dividends	3a		dinary dividends .		. 3b		
withheld.	4a	IRA distributions	4a		xable amount				
If you did not	5a	Pensions and annuities	5a	b Tax	xable amount		. 5b		
get a Form	6	Reserved for future use					. 6		
W-2, see instructions.	7	Capital gain or (loss). Attach Sche	edule D (Fo	rm 1040) if required. If n	ot required, check h	nere	□ 7		
	8	Other income from Schedule 1 (Fe	orm 1040),	line 10			. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, an	d 8. This is	s your total effectively o	connected income		. 9		49,224.
	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						+	49,224.
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)							12,950.
	13a	Qualified business income deduc-	tion from F	orm 8995 or Form 8995	-A . 13a				
	b	Exemptions for estates and trusts	only (see i	instructions)	13b				
	С	Add lines 13a and 13b					. 130	:	
	14								12,950.
	15	Subtract line 14 from line 11. If ze	ro or less	enter -0 This is vour ta	xable income .		. 15		36,274.

Tax and	16	Tax (see instructions). Check if an	y from For	rm(s): 1 \square 88	1 4 2 497	2 3			16	4,148.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3					17	0.
	18	Add lines 16 and 17							18	4,148.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (Form 10	40) .			19	
	20	Amount from Schedule 3 (Form 1	040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0					22	4,148.
	23a	Tax on income not effectively cor Schedule NEC (Form 1040-NR), I				23a				
	b	Other taxes, including self-emplo	•	•	,	23b			-	
	С	Transportation tax (see instruction	ns)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is you	ır total ta	x					24	4,148.
Payments	25	Federal income tax withheld from	n:							
	а	Form(s) W-2				25a	- 6	,441.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	6,441.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2022 estimated tax payments an	d amount	applied from 20	21 return				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S	chedule 8	8812 (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 1	040), line	15		31				
	32	Add lines 28, 29, and 31. These a	are your t o	otal other paym	ents and refunda	able cre	dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your to	tal payments .				33	6,441.
Refund	34	If line 33 is more than line 24, sul	otract line	24 from line 33.	This is the amour	nt you o	verpaid		34	2,293.
	35a	Amount of line 34 you want refu			is attached, chec	k here			35a	2,293.
Direct deposit?	b	Routing number 0 7 5 0	0 0	0 1 9	c Type: 🗵	Checkii	ng 🗌	Savings		
See instructions.	d	Account number 8 5 5 3 6 3 7 3 2								
	е	If you want your refund check m	ailed to a	n address outsid	e the United State	es not s	hown on	page 1,		
		enter it here.								
	36	Amount of line 34 you want appl				36				
Amount	37	Subtract line 33 from line 24. This	s is the ar	mount you owe.						
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions .				37	
	38	Estimated tax penalty (see instru	ctions) .			38				
Third	Do yo	u want to allow another person to	discuss t	his return with th	e IRS? See instru	ctions.		es. Compl	ete bel	ow. 🛛 No
Party Designee	Desig name	nee's 		Phone no.				nal identifi er (PIN)	cation [
		penalties of perjury, I declare that I have they are true, correct, and complete. D								
Sign	Your	signature		Date	Your occupation					ent you an Identity
Here								I	r	PIN, enter it here
					SOFTWARE E	NGIN	EER	(see	inst.)	
	Phone		_	Email address		l		DTII:		
Paid	Prepa	rer's name		's signature		Date		PTIN		Check if:
Preparer					GUPTA TALLAM	03/04	1/2023	P02082		Self-employed
Use Only		name SYANTLARBYAT RANTASXIAS G						Phone n		78)965-9522
,	Firm's	address 245 DOOMEV C	ים יו יי	TINDING IN	T 00016			Firm's Fl	N Q	4-3171965

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.

ZUZZ	
Attachment Sequence No. 7B	

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number SAI KUMAR REDDY ALAVALA 661-68-4977

	Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
	Nature of income		(a) 1070	(b) 1070	(c) 3070	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, 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) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add colum					NR, line 23a 15	
	Capital Gains and Losses F	rom	Sales or Excha	nges of Properl	y	I	
losses to exchange within to	nly the capital gains and rom property sales or ges that are from sources he United States and not hand to the capital gains and comproperty sales or ges that are from sources he United States and not hand to the capital gains and grow (if necessary, attach statement of descriptive details not shown below) (b) Date acquired mm/dd/yyy		(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. s. Do not include a gain						
or loss	on disposing of a U.S. real y interest; report these						
gains a (Form 1	nd losses on Schedule D						
	property sales or						
connec	ges that are effectively led with a U.S. business 17 Add columns (f) and (g) of line 16				17	(
	haddle D (Form 1040), 797, or both. 18 Capital gain. Combine columns (f) and (g) of line 17	 '. Ente	er the net gain here	and on line 9 abo		r -0 18	

Enter **amount of income** under the appropriate rate of tax. See instructions.

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name	shown on Form 1040-NR				Your identifying number					
SAI	I KUMAR REDDY ALAVALA				661-68-4977					
Α	Of what country or countries were you	a citizen or national	during 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 ca	🗌 Yes	⊠No							
D	Were you ever:									
						⊠ No				
2	2. A green card holder (lawful permanent	resident) of the Unit	ed States? .		🗌 Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pu		•							
E	If you had a visa on the last day of the immigration status on the last day of the	e tax year. <u>F1</u>								
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and left the U	Inited States during	2022. See instr	uctions.						
	Note: If you're a resident of Canada of									
	check the box for Canada or Mexico	and skip to item H		L Canada	☐ Mexico					
		eparted United States	3	Date entered United State		States				
	mm/dd/yy	mm/dd/yy	_	mm/dd/yy	mm/dd/yy					
			_							
			\dashv							
			_							
н	Give number of days (including vacation	nonworkdays and r	 ⊃artial dave) vou	were present in the United	States during:					
	2020, 20				_					
I	Did you file a U.S. income tax return for if "Yes," give the latest year and form r	r any prior year? .			Yes	⊠ No				
J	Are you filing a return for a trust?				Yes	⊠ No				
	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person?									
K	Did you receive total compensation of					⊠ No				
	If "Yes," did you use an alternative me	thod to determine th	e source of this	compensation?	🗌 Yes	No				
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.									
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									
	(A) T 1 E	1040 NIP " 5								
_	(e) Total. Enter this amount on Form 1	·	•			No				
	Were you subject to tax in a foreign co			· ·		No X No				
3	3. Are you claiming treaty benefits pursua If "Yes," attach a copy of the Compete		-		∟ Yes	△ NO				
R#	• • • • • • • • • • • • • • • • • • • •	an Authority determi	nation letter to	your return.						
M	Check the applicable box if:	alaction to tract in a	omo from roo! =	roporty located in the Limit	ad States as affactively as-	nootod				
	This is the first year you are making an with a U.S. trade or business under service and a service in a province.	ction 871(d). See ins	tructions							
	2. You have made an election in a prev States as effectively connected with a	U.S. trade or busine	ss under sectio	ea, to treat income from ren 871(d). See instructions .	eal property located in the					