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

	1		_				
Submi	ssion Identification Number (SID)						
Taxpaye	pr's name	Social securi	ty numl	per			
VARI	UN KUMAR CHILUKURI	106-45	-938	1			
Spouse'			Spouse's social security number				
Part	, , ,	year you a	re au	thorizing.)		
	whole dollars only on lines 1 through 5.						
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		۱.	1 15	4.40		
1	Adjusted gross income		1	15	78.		
2 3	Total tax		3				
4	Amount you want refunded to you		4		451.		
5	Amount you owe		5		373.		
Part	•	eep a cop		our retu	rn)		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)						
return (to send for any Agent t paymen authori paymen busines taxes t person	oviledge 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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectled in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. in initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the interval of the interval 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 terminate the interval of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises 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 part of Europe Withdrawal Consent.	tter, or electriction of the ti S. Treasury a cated in the ti in to debit the the authorizatests must be processing of ayment. I fur	onic reransmismod its of ax prepartion. The receiff the elanger according to the receiff the receiff the according to the according to the receiff the according to the according to the receiff the according to th	turn origina ssion, (b) the designated paration soft to this according for revoke (ved no late ectronic pasknowledge	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
	nic Funds Withdrawal Consent.						
· -	yer's PIN: check one box only	5	9 :	3 8 1			
×	I authorize GLOBAL TAXES LLC to enter or generate r	ř En		digits, but	as 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 no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Your s	ignature ▶ Date ▶						
Spous	se's PIN: check one box only						
	I authorize to enter or generate it	ny PIN			as my		
	ERO firm name			digits, but			
_	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 notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
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.	2 4 9 Don't ent	6 0 er all ze	8 2 7 eros	1		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this reti	urn in a	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 U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn			ing	, 2023,	ending	, 2	0	See separate instructions.		
Your first name	and r	niddle initial	Last na	ame			Your iden	tifying number		
							(see instru	ictions)		
VARUN KUN	1AR		CHIL	UKURI			106-45-9381			
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.		
1001 W R7	E 6	6								
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code		
WILLIAMS						AZ	8	6046		
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign po	ostal code			
	_									
Filing	×	Single	arately (N	MFS) Qualifyii	ng surviving spouse (QSS)	☐ Estat	e 🗌 Trust		
Status		you checked the QSS box, enter the				,				
Check only		•		. ,		•				
one box.	^+ -		/			:	/l=\ ==!! =	-1		
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a f					(b) sell, ex			
Dependents	+	3			, (,			qualifies for (see inst.):		
(see instructions)				(2) Dependent's		Child	tax credit	Credit for other		
(****		(1) First name Last name		identifying number	(3) Relationship to yo	u Oillia		dependents		
If more than four								<u> </u>		
dependents, see							<u> </u>			
instructions and check here							<u> </u>			
	4-	Tatal and a supplier to the same (a) W. O. have	. 1 /:				<u> </u>	15,448.		
Income	1a	Total amount from Form(s) W-2, box	•	•			1a	13,440.		
Effectively	b	Household employee wages not rep Tip income not reported on line 1a (` '			1b 1c			
Connected With U.S.	c d	Medicaid waiver payments not repo		·			1d			
Trade or	e	Taxable dependent care benefits fro		• • • • • • • • • • • • • • • • • • • •	,		1e			
Business	f	Employer-provided adoption benefit		•			1f			
Dusiness	g g	Wages from Form 8919, line 6		·			1g			
Attach	h	Other earned income (see instructio					1h			
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use					1j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		, ,	tem L, 1k					
attach	z	Add lines 1a through 1h			· · <u> </u>		1z	15,448.		
Form(s)	2a	Tax-exempt interest 2a	- 1	1	able interest		2b			
1099-R if tax was	3a	Qualified dividends 3a	a	b Ord	linary dividends		3b			
withheld.	4a	IRA distributions 4			able amount		4b			
If you did not	5a	Pensions and annuities 5a	а	b Tax	able amount		5b			
get a Form W-2, see	6	Reserved for future use					6			
instructions.	7	Capital gain or (loss). Attach Schedu			•		7			
	8	Additional income from Schedule 1 (Form 1040), line 10								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income						15,448.		
	10	Adjustments to income from Sched income			•		10			
	11	Subtract line 10 from line 9. This is y	our adj u	sted gross income			11	15,448.		
	12	Itemized deductions (from Schedudeduction (see instructions)						13,850.		
	13a	Qualified business income deductio			1 1					
	b	Exemptions for estates and trusts of	nly (see i	nstructions)	13b					
	С	Add lines 13a and 13b					13c			
	14	Add lines 12 and 13c					14	13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income	<u> </u>	15	1,598.		

Form 1040-NR (2	2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 497	2 3 🗌		16	159.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			17	0.
	18	Add lines 16 and 17			18	159.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form 1040), line 8			20	81.
	21	Add lines 19 and 20			21	81.
	22	Subtract line 21 from line 18. If zero or less, enter -0			22	78.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a			
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	23b			
	С	Transportation tax (see instructions)	23c			
	d	Add lines 23a through 23c			23d	
	24	Add lines 22 and 23d. This is your total tax			24	78.
Payments	25	Federal income tax withheld from:				
	а	Form(s) W-2	25a	451.		
	b	Form(s) 1099	25b			
	С	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c			25d	451.
	е	Form(s) 8805			25e	
	f	Form(s) 8288-A			25f	
	g	Form(s) 1042-S			25g	
	26	2023 estimated tax payments and amount applied from 2022 return			26	
	27	Reserved for future use	27			
	28	Additional child tax credit from Schedule 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 1040), line 15	31			
	32	Add lines 28, 29, and 31. These are your total other payments and refunda	ble credits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .			33	451.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount	t you overpaid		34	373.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, chec	k here	🗆 🛚	35a	373.
Direct deposit?	b	Routing number 1 2 2 1 0 1 7 0 6 c Type:	Checking	Savings		
See instructions.	d	Account number 4 5 7 0 4 8 0 1 5 7 2 3		-		
	е	If you want your refund check mailed to an address outside the United State	es not shown on	page 1,		
		enter it here.				
	36	Amount of line 34 you want applied to your 2024 estimated tax	36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe .				
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions .			37	
	38	Estimated tax penalty (see instructions)	38			
Third	Do yo	u want to allow another person to discuss this return with the IRS? See instru	ctions.	es. Comple	ete belo	w. 🗵 No
Party Designee	Designee's Phone Personal identif				cation	
		penalties of perjury, I declare that I have examined this return and accompanying scheduthey are true, correct, and complete. Declaration of preparer (other than taxpayer) is base				
Sign	Yours	signature Date Your occupation		If the	IRS se	nt you an Identity
Here		STUDENT	· ·			IN, enter it here
	Phone	e no. Email address				
Paid	Prepa	rer's name Preparer's signature	Date	PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM	02/14/2024	P02082	703	Self-employed
Preparer	Firm's	name GLOBAL TAXES LLC		Phone no	. (67	8)965-9522
Use Only	Firm's	address 245 ROONEY CT E BRUNSWICK NJ 08816	-	Firm's Ell		-3171965

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

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

Your social security number 106-45-9381

Par	Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		. 1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	ch . 2		
3	Education credits from Form 8863, line 19		. 3	
4	Retirement savings contributions credit. Attach Form 8880		. 4	81.
5a	Residential clean energy credit from Form 5695, line 15		. 5a	
b	Energy efficient home improvement credit from Form 5695, line 32		. 5b	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Reserved for future use	6e		
f	Clean vehicle credit. Attach Form 8936	6f		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
ı	Amount on Form 8978, line 14. See instructions	61		
m	Credit for previously owned clean vehicles. Attach Form 8936.	6m		
z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		. 7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040, 1040-SR, d	or	
	1040-NR, line 20		. 8	81.
			(continue	ed on page 2)

Schedule 3 (Form 1040) 2023 Page **2**

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

VARUN KUMAR CHILUKURI 106-45-9381 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 Motion picture or TV copyright royalties 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). 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 (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name sl	nown on Form 1040-NR				Your identifying	number	
VARU	IN KUMAR CHILUKURI				106-45-9	381	
Α	Of what country or countries we	ere you a citizen or nationa	al during the tax	/ear? INDIA			
В	In what country did you claim r	esidence for tax purposes	during the tax y	ear? United States			
С	Have you ever applied to be a g	green card holder (lawful p	ermanent resider	nt) of the United States? .		☐ Yes	⊠ No
D	Were you ever:						
1.	A U.S. citizen?					☐ Yes	⊠ No
2.	A green card holder (lawful perr	manent resident) of the Un	ited States? .			☐ Yes	⊠ No
	If you answer "Yes" to (1) or (2)	, see Pub. 519, chapter 4,	for expatriation r	ules that apply to you.			
E	If you had a visa on the last dimmigration status on the last da		• • •	you didn't have a visa, er	•		
F	Have you ever changed your visit you answered "Yes," indicate		us) or U.S. immi			☐ Yes	⊠ No
G	List all dates you entered and le Note: If you're a resident of Ca check the box for Canada or	anada or Mexico AND con	nmute to work in	uctions. the United States at frequ			
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Date entered United State mm/dd/yy		arted Unite mm/dd/yy	d States
н	Give number of days (including v	reaction nonworkdove and		ware present in the United	Statoo during:		
п				nd 2023 365			
ı	Did you file a U.S. income tax rulf "Yes," give the latest year and	eturn for any prior year?.				⊠ Yes	□No
J	Are you filing a return for a trust	7		1040NK		Yes	⊠ No
Ū	If "Yes," did the trust have a U U.S. person, or receive a contril	.S. or foreign owner unde	r the grantor trus	st rules, make a distribution	n or loan to a	□ Yes	□No
K	Did you receive total compensa	ition of \$250,000 or more	during the tax ye	ar?		☐ Yes	⊠ No
	If "Yes," did you use an alternat					☐ Yes	☐ No
L	Income Exempt From Tax-If complete (1) through (3) below.	you are claiming exempti	on from income	tax under a U.S. income		a foreign	country,
1.	Enter the name of the country, the amount of exempt income in the				claimed the tre	eaty benefi	t, and the
	(a) Coun	try	(b) Tax treaty ar	ticle (c) Number of month claimed in prior tax ye	, ,	ount of exe n current to	
	(a) Total Enter this amount an	Form 1040 ND line 11: D	o not ontor it co	where else on line 1			
0	(e) Total. Enter this amount on		-			Yes	□No
	Were you subject to tax in a for Are you claiming treaty benefits					⊔ Yes □ Yes	⊔ No ⊠ No
ა.	If "Yes," attach a copy of the Co	·	•			∟ res	△ NO
М	• •	ompetent Authority detern	manon letter to	your return.			
	Check the applicable box if: This is the first year you are ma						onnected
	with a U.S. trade or business ur	` '					🗆
2.	You have made an election in States as effectively connected						

Form **8880**

Credit for Qualified Retirement Savings Contributions

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074

2023

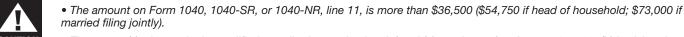
Attachment Sequence No. 54

Name(s) shown on return

Your social security number 106-45-9381

VARUN KUMAR CHILUKURI

You cannot take this credit if either of the following applies.



• The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2006; (b) is claimed as a dependent on someone else's 2023 tax return; or (c) was a **student** (see instructions).

	•		,	(-)	,		(a) You		(b) Your	spouse
1			ontributions, and AE 023. Do not include ro			1				-	
2	Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2023 (see instructions) 2								61.		
3	Add lines 1 an	d 2				3			61.		
4	extensions) of	your 2023 tax	ed after 2020 and return (see instructio oth columns. See inst	ns). If married filing jo	ointly, include	4					
5	Subtract line 4	from line 3. If	zero or less, enter -0-			5		1	61.		
6	In each colum	n, enter the sn	naller of line 5 or \$2,0	00		6		1	61.		
7	Add the amou	nts on line 6. It	f zero, stop ; you can't	t take this credit					7		161.
8	Enter the amo	unt from Form	1040, 1040-SR, or 10	040-NR, line 11*	8		15,4	48.			
9	Enter the appl	icable decimal	amount from the tabl	e below.							
	If line	8 is-	<i>I</i>	And your filing status	s is—						
	Over—	But not over—	Married filing jointly	Head of household	Single, Marr separate	ly, or					
				n line 9—	Qualifying survi		ouse				
		\$21,750	0.5	0.5	0.5						
	\$21,750	\$23,750	0.5	0.5	0.2						
	\$23,750	\$32,625	0.5	0.5	0.1				9	Х	.5
	\$32,625	\$35,625	0.5	0.2	0.1						
	\$35,625	\$36,500	0.5	0.1	0.1						
	\$36,500	\$43,500	0.5	0.1	0.0						
	\$43,500	\$47,500	0.2	0.1	0.0						
	\$47,500	\$54,750	0.1	0.1	0.0						
	\$54,750	\$73,000	0.1	0.0	0.0						
	\$73,000		0.0	0.0	0.0						
		Note: I	f line 9 is zero, stop ;	you can't take this cre	edit.		-				
10	Multiply line 7	by line 9 .						.]	10		81.
11			ity. Enter the amount						11		159.
12	•		ent savings contrib								
	and on Sched	ule 3 (Form 10	40), line 4						12		81.

^{*} See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.