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

Internal Revenue Service	ormation.
Submission Identification Number (SID)	
Taxpayer's name	Social security number
SRAVANI AREPALLI	688-02-5766
Spouse's name	Spouse's social security number
Dart L. Tou Deturn Information Tou Very Ending Describer 04	(Fortage of the side of the si
	2023 (Enter year you are authorizing.)
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 3,500.
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure yo	u get and keep a copy of your return)
return (original or amended) I am now authorizing. I consent to allow my intermediate service processing my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I and Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the final authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment callousiness days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues repersonal identification number (PIN) below is my signature for the income tax return (original or Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter ERO firm name signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition below.	reason for rejection of the transmission, (b) the reason uthorize the U.S. Treasury and its designated Financial in account indicated in the tax preparation software for ancial institution to debit the entry to this account. This not to terminate the authorization. To revoke (cancel) a ncellation requests must be received no later than 2 envolved in the processing of the electronic payment of elated to the payment. I further acknowledge that the amended) I am now authorizing and, if applicable, my or generate my PIN or generate my PIN Enter five digits, but don't enter all zeros g. nded) I am now authorizing. Check this box only
Your signature ▶	Date ▶
Spouse's PIN: check one box only	
	or generate my PIN as my
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 ame if you are entering your own PIN and your return is filed using the Practition below.	nded) I am now authorizing. Check this box only
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only—cont	tinue below
Part III Certification and Authentication — Practitioner PIN Method O	nly
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PII	N. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individe authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file	nat I am submitting this return in accordance with the
ERO's signature ▶	Date ▶
ERO Must Retain This Form — See Inst	

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

E1040-NR 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	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20	See separate instructions.	
Your first name and middle initial Last name					Your ide	ntifying number			
					(see instri	uctions)			
SRAVANI AREPALLI 6						688-0	688-02-5766		
Home address (numk	per and street). If you have a P.O. box	, see ins	structions.				Apt. no.	
1607B COL	LEG	E FARM RD							
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State	Z	IP code	
MURRAY						KY	4	2071	
Foreign country name Foreign province/state/county Foreign po							oostal code)	
Filing	×	Single	arataly (N	MES) Qualifyir	ng surviving spouse (OSS)	☐ Esta	te 🗌 Trust	
Status			ic mast						
Check only	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependence only								
one box.									
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f							
D		Twise dispose of a digital asset (of a f	manciai	lintorest in a digital asset	j: (Occ manactions.)		ook the boy it	f qualifies for (see inst.):	
Dependents (see instructions):				(2) Dependent's		i		Credit for other	
(see instructions).		(1) First name Last name		identifying number	(3) Relationship to yo	ou Chii	d tax credit	dependents	
If more than four									
dependents, see									
instructions and									
check here							Щ		
Income	1a	Total amount from Form(s) W-2, box	`	,				3,500.	
Effectively	b	Household employee wages not rep		` '			. 1b		
Connected	С	Tip income not reported on line 1a (s		,			. 1c		
With U.S.	d	Medicaid waiver payments not repo		` '	,		. 1d		
Trade or	е	Taxable dependent care benefits fro		•			. 1e		
Business	f	Employer-provided adoption benefit		·			. 1f		
Attach	g	Wages from Form 8919, line 6					. 1g		
Form(s) W-2,	h :	Other earned income (see instruction	,				. 1h		
1042-S, SSA-1042-S,	i :	Reserved for future use					4:		
RRB-1042-S,	J Ir					• •	. 1j		
and 8288-A	k	Total income exempt by a treaty from line 1(e)			1k				
here. Also attach	z	Add lines 1a through 1h			[18]		. 1z	3,500.	
Form(s)	- 2а	Tax-exempt interest 2a	1	b Tax	able interest		. 2b		
1099-R if tax was	3a	Qualified dividends 3a			linary dividends		. 3b		
withheld.	4a	IRA distributions 4a			able amount				
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount		. 5b		
get a Form	6	Reserved for future use					. 6		
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If no	ot required, check he	re [7		
	8	Additional income from Schedule 1	(Form 10	040), line 10			. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	. 9	3,500.					
	10	Adjustments to income from Sched income	•	orm 1040), line 26. These	•				
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			. 11	3,500.	
	12	Itemized deductions (from Schedu	ıle A (Fo	rm 1040-NR)) or, for cer	tain residents of Ind	ia, standa	ırd		
		deduction (see instructions)						13,850.	
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts of							
	С	Add lines 13a and 13b	. 13c						
	14							13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		. 15	0.	

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	14 2 497	2 3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form 10						17	0.
	18	Add lines 16 and 17	18	0.					
	19	Child tax credit or credit for other	19						
	20	Amount from Schedule 3 (Form 10	20						
	21	Add lines 19 and 20	21						
	22	Subtract line 21 from line 18. If ze						22	0.
	23a	Tax on income not effectively con-	nected w	rith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), lin	ne 15 .			23a			
	b	Other taxes, including self-employ	yment ta	x, from Schedule	e 2 (Form 1040),				
		line 21	·			23b			
	С	Transportation tax (see instruction	ns)			23c			
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is your						24	0.
Payments	25	Federal income tax withheld from							
•	а	Form(s) W-2				25a	60.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	60.
	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 20	22 return			26	
	27	Reserved for future use				27			
	28	Additional child tax credit from Sc				28			
	29	Credit for amount paid with Form	1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 10				31			
	32	Add lines 28, 29, and 31. These a	32						
	33	Add lines 25d, 25e, 25f, 25g, 26, a	33	60.					
Refund	34	If line 33 is more than line 24, sub	34	60.					
	35a	Amount of line 34 you want refun	35a	60.					
Direct deposit?	b	Routing number 0 8 3 9	0 0	3 6 3	c Type:	Checking	Savings		
See instructions.	d	Account number 1 4 5 8	1 3	8 3 1 9	0 9				
	е	If you want your refund check ma	iled to ar	n address outsid	e the United State	s not shown on	page 1,		
		enter it here.							
	36	Amount of line 34 you want applie				36			
Amount	37	Subtract line 33 from line 24. This	is the ar	nount you owe.					
You Owe		For details on how to pay, go to w	/ww.irs.g	ov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instruc							
Third	Do yo	ou want to allow another person to	es. Compl	ete belo	ow. 🛛 No				
Party	Desig	esignee's Phone Personal identif							
Designee	name	name no. number (PIN)							
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								
Sign	Your signature			Date Your occupation			If the	RS se	ent you an Identity
Here		3 - 3 - 1				Prote	ection F	PIN, enter it here	
	STUDENT (see						inst.)		
	Phone no. Email address								
Paid	Prepa	ırer's name	Preparer'	's signature		Date	PTIN	T	Check if:
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA	SYAM I	PRIYA RAM S	SAGAR GUPTA	03/17/2024	P02082	2703	Self-employed
-	Firm's name CIODAI TAVEC IIC Phone n							0. (67	78)965-9522
Use Only	Firm's address 2/5 DOONEY OF FIRMINGWICK NIT 09916 Firm's FI								

BAA

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name shown on Form 1040-NR Your identifying number SRAVANI AREPALLI 688-02-5766 Enter amount of income under the appropriate rate of tax. See instructions

Nature of Income					(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
				(a) 1070				%	%	
1	Dividends and divide	end equivalents:								
а	Dividends paid by U	S. corporations			1a					
b	Dividends paid by fo	reign corporations			1b					
С	Dividend equivalent p	ayments received v	vith respect to section 871(r	m) transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	orations			2b					
С					2c					
3	Industrial royalties (p	atents, trademarks	s, etc.)		3					
4	Motion picture or TV	copyright royalties	3		4					
5	Other royalties (copy	rights, recording, p	oublishing, etc.)		5					
6	Real property incom	e and natural resou	urces royalties		6					
7	Pensions and annuit	ies			7					
8	Social security bene-	fits			8					
9	Capital gain from line	e 18 below			9					
10	· · · · · · · · · · · · · · · · · · ·									
а	Winnings									
b										
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed				11					
12										
					12					
13	Add lines 1a through	12 in columns (a)	through (d)		13					
14	Multiply line 13 by r	ate of tax at top o	of each column		14					
15	Tax on income not e	ffectively connecte	ed with a U.S. trade or busi						-NR, line 23a 15	
			Capital Gains	and Losses F	rom	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		(if necessa	property and description ary, attach statement of 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).
effectiv	ely connected with a U.S. s. 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).										
	property sales or									
connec	ges that are effectively ted with a U.S. business	17 Add column	ns (f) and (g) of line 16					17	(
	edule D (Form 1040), 797, or both.		n. Combine columns (f) a							

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Name sl	nown on Form 1040-NR	Your identifying number									
SRAV	ANI AREPALLI				688-02-5766						
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		☐ Yes	⊠ No							
D	Were you ever:										
1.	A U.S. citizen?		☐ Yes	⊠ No							
2.	A green card holder (lawful pe		☐ 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 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 visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and	left the United States durin									
	Note: If you're a resident of C				ent intervals,						
	check the box for Canada or	Mexico and skip to item h	<u> 1 .</u> <u>. </u>	🗌 Canada	Mexico						
	Date entered United States	Date departed United State	es C	ate entered United State			d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	m/dd/yy	уу				
Н	Give number of days (including 2021										
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.				☐ Yes	⊠ No				
J	Are you filing a return for a true If "Yes," did the trust have a U.S. person, or receive a conti	st?.......... J.S. or foreign owner unde	r the grantor trust ru		or loan to a	☐ Yes ☐ Yes	⊠ No □ No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax year?			☐ Yes	⊠ No				
	If "Yes," did you use an alterna	ative method to determine t	the source of this co	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 trea	aty benefit	;, and the				
	(a) Cou	ntry	(b) Tax treaty article	nths (d) Amount of exempt income in current tax year							
	(e) Total. Enter this amount o	n Form 1040-NR, line 1k. D	o not enter it anvwh	ere else on line 1							
2.	Were you subject to tax in a fo		-			☐ Yes	☐ No				
	Are you claiming treaty benefit		,	•		☐ Yes	⊠ No				
	If "Yes," attach a copy of the C		-								
М	Check the applicable box if:										
1. This is the first year you are making an election to treat income from real property located in the United States as effective with a U.S. trade or business under section 871(d). See instructions											
2.	2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions										