Form 8879
(Rev. January 2021)
Department of the Treesure

epartment 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.

Submission Identification Number (SID)

Taxpay	ver's name	Social security n	lumber
SAI	LAKSHMI ROHAN PENDYALA	016-71-4	670
Spouse	o's name	Spouse's social	security number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r 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 29,423.
2	Total tax	[2 1,536.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 3,357.
4	Amount you want refunded to you	[4 1,821.
5	Amount you owe	[5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

	1	4	6	7	0					
Enter five digits, but don't enter all zeros										

my

ERO firm name 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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name 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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date ►
Practitioner PIN Metho	d Returns Only—continue below
Part III Certification and Authentication – Practit	ioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fi	ve-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
Dor			
For Demonstrate Deduction Act Natio	· · · · · · · · · · · · · · · · · · ·		Form 8870 (Day, 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040	_	NR Department of the Treasury-Inter U.S. Nonresident Al	rnal Revenue Service	Return	2023	OMB No. 1	545-0074	or sta	Only—Do not write ple in this space.
For the year Jan	n. 1-	Dec. 31, 2023, or other tax year beginn	iing	, 2023, ei	nding		, 20		ee separate
Your first name			Last name						ing number
							(see in	structio	ns)
SAI LAKSH	IMI	ROHAN	PENDYALA				016	-71-4	1 670
Home address (nur	nber and street). If you have a P.O. box	, see instructions.						Apt. no.
119 N 72N									304
City, town, or po	ost	office. If you have a foreign address, al	so complete spaces bel	ow.		State		ZIP co	
OMAHA						NE		681	14
Foreign country	nai	ne	Foreign province/state	/county		Foreign	postal c	ode	
F ilin a									
Filing Status		Single Married filing separate	arately (MFS)	Qualifying	surviving spous	e (QSS)	🗌 Е	state	🗌 Trust
Check only		f you checked the QSS box, enter the o	child's name if the qualif	ying perso	n is a child but n	ot your de	pendent:		
one box.	-							-	
Digital Assets	At	any time during 2023, did you: (a) rece	ive (as a reward, award,	or paymer	t for property or	services);	or (b) sell	, exchai	nge, or
		nerwise dispose of a digital asset (or a f							
Dependents						(4) C	heck the b	ox if qual	ifies for (see inst.):
(see instructions):		(1) First name Last name	(2) Depende identifying nu		(3) Relationship to	VOLI Cł	nild tax cre	dit 0	Credit for other dependents
	-				(0) Holdhorinp to	,			
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	x 1 (see instructions) .				. 1a	a	29,423.
Effectively	b	Household employee wages not rep	orted on Form(s) W-2 .				. 11	2	
Connected	C							>	
With U.S.	d	· · · · · · · · · · · · · · · · · · ·					. 10	1	
Trade or	e						. 10		
Business	f						. 1		
Attach	g L	0					. 19		
Form(s) W-2,	h i	Other earned income (see instructio Reserved for future use					. 11	1	
1042-S, SSA-1042-S,	;	Reserved for future use					. 1		
RRB-1042-S,	, k						· -		
and 8288-A here. Also		line 1(e)							
attach	z						. 1:	z	29,423.
Form(s) 1099-R if	2 a	Tax-exempt interest 2a	a	b Taxal	ble interest		. 21	2	
tax was	3a	Qualified dividends 3a	a	b Ordir	ary dividends .		. 31)	
withheld.	4a				ble amount)	
If you did not get a Form	5a		1		ble amount				
W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Schedu Additional income from Schedule 1							
	8 9	Additional income from Schedule 1 Add lines 1z, 2b, 3b, 4b, 5b, 7, and							29,423.
	10	Adjustments to income from Sched							27,123.
	10				-	-		b	
	11	Subtract line 10 from line 9. This is y							29,423.
	12	Itemized deductions (from Schedu							
		deduction (see instructions)						2	13,850.
	13a								
	b	•	,						
	C						. 13	c	
	14								13,850.
	<u>15</u>	Subtract line 14 from line 11. If zero			ible income .		. 1	_	15,573.

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

orm 1040-NR (2	2023)								Page 2
ax and	16	Tax (see instructions). Check if an	y from Fo	rm(s): 1 🗌 88	314 2 497	2 3		16	1,649.
Credits	17	Amount from Schedule 2 (Form ⁻						. 17	0.
	18	Add lines 16 and 17							1,649.
	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 ⁻	1040), line	8				. 20	113.
	21	Add lines 19 and 20						. 21	113.
	22	Subtract line 21 from line 18. If z	ero or les	s, enter -0				. 22	1,536.
	23a	Tax on income not effectively cor	nnected w	/ith a U.S. trade of	or business from				
		Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo	oyment ta	x, from Schedul	e 2 (Form 1040),				
		line 21	-		. ,	23b			
	с	Transportation tax (see instruction	ons) .			23c			
	d	Add lines 23a through 23c						. 23d	
	24	Add lines 22 and 23d. This is you	ur total ta	x				. 24	1,536.
ayments	25	Federal income tax withheld from							
.,	а	Form(s) W-2				25a	3,35	7.	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						. 25d	3,357.
	е	Form(s) 8805						. 25e	
	f	Form(s) 8288-A						. 25f	
	g	Form(s) 1042-S							
	26	2023 estimated tax payments an							,
	27	Reserved for future use		••		27			
	28	Additional child tax credit from S				28			
	29	Credit for amount paid with Form				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form ⁻				31			
	32	Add lines 28, 29, and 31. These a	,.					. 32	
	33	Add lines 25d, 25e, 25f, 25g, 26,							3,357.
efund	34	If line 33 is more than line 24, sul							1,821.
	35a	Amount of line 34 you want refu					_		1,821.
ect deposit?	b	Routing number 1 0 3 0				_	Savin		·
instructions.	d	Account number 5 2 6 8 9 2 7 2 7							
	е	If you want your refund check m	· · ·		le the United State	es not shown on	page	1.	
		enter it here.							
	36	Amount of line 34 you want appl	ied to vo	ur 2024 estimat	ed tax	36			
nount	37	Subtract line 33 from line 24. Thi				I I			
ou 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			
nird	Do yo	u want to allow another person to				ctions. Y	es. Co	mplete bel	ow. 🛛 No
arty	Desig			Phone				entification	
esignee	name		J)						
		penalties of perjury, I declare that I hav	e examine	d this return and ac		lles and statement			
	belief,	they are true, correct, and complete. D	eclaration	of preparer (other t	han taxpayer) is base	ed on all informatio	on of wh	nich prepare	r has any knowledge.
gn	Your s	signature		Date	Your occupation				ent you an Identity
ere									PIN, enter it here
ŀ	<u> </u>				APPLICATION	I DEVELOPME	IN.T, ((see inst.)	
	Phone		Duest	Email address		Data	אידס		
aid	•	rer's name	•	's signature		Date	PTIN		Check if:
		PRIYA RAM SAGAR GUPTA TALLAM		RIYA RAM SAGAF	R GUPTA TALLAM	02/12/2024		082703	Self-employed
reparer +		name GLOBAL TAXES I	'T'C				Phor	ne no. (6'	78)965-9522
reparer - se Only -		address 245 ROONEY C							4-3171965

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074 20

3

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

	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.						
	. ,	rm 1040, 1040-SR, or 1040-NR				ecurity number	
Par		undable Credits		016-'	/1-4	670	
1		credit. Attach Form 1116 if required			1		
2	-	hild and dependent care expenses from Form 2441		Attach	•		
_	Form 2441	· · · · · · · · · · · · · · · · · · ·			2		
3	Education cr	redits from Form 8863, line 19			3		
4	Retirement s	savings contributions credit. Attach Form 8880			4	113.	
5a	Residential of	clean energy credit from Form 5695, line 15			5a		
b	Energy effici	ent home improvement credit from Form 5695, line 32			5b		
6	Other nonref	fundable credits:					
а	General busi	iness credit. Attach Form 3800	6a				
b	Credit for pri	ior year minimum tax. Attach Form 8801	6b				
С	Adoption cre	edit. Attach Form 8839	6c				
d	Credit for the	e elderly or disabled. Attach Schedule R	6d				
е	Reserved for	r future use	6e				
f	Clean vehicle	e credit. Attach Form 8936	6f				
g	Mortgage in	terest credit. Attach Form 8396	6g				
h	District of Co	olumbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified ele	ctric vehicle credit. Attach Form 8834	6i				
j	Alternative fu	el vehicle refueling property credit. Attach Form 8911	6ј				
k	Credit to hol	ders of tax credit bonds. Attach Form 8912	6k				
I	Amount on F	Form 8978, line 14. See instructions	6I				
m	Credit for pr	eviously owned clean vehicles. Attach Form 8936 .	ôm				
z	Other nonref	fundable credits. List type and amount:					
			6z				
7		nonrefundable credits. Add lines 6a through 6z			7		
8		through 4, 5a, 5b, and 7. Enter here and on Form 10			0		
	1040-INK, IIN	ne 20			8	113. ued on page 2)	
				(00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ieu un paye 2)	

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2023

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		
	BAA REV	02/05/24 PRO	Schedu	ule 3 (Form 1040) 2023

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2023 Attachment Sequence No. 7B

Your identifying number

016-71-4670

Name shown on Form 1040-NR SAI LAKSHMI ROHAN PENDYALA

nter a	amount of income unde	er the appropriate rate of tax. See instructions.							
		Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
					(a) 10%	(0) 13%	(C) 30 %	%	%
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 with respect to section 871(m) tran	nsactions	1c					
2	Interest:								
а				2a					
b		orations		2b					
С				2c					
3	• •	atents, trademarks, etc.)	-	3					
4		copyright royalties		4					
5	• • • •	rights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7		ies		7					
8	•	fits		8					
9		e 18 below		9					
10	If zero or less, ente								
а	Winnings								
b	Losses			10c					
11	Gambling – Resident Note: Enter winnings	ts of countries other than Canada. s only. Losses aren't allowed		11					
12									
				12					
3		12 in columns (a) through (d)		13					
4	Multiply line 13 by r	ate of tax at top of each column	[14					
15	Tax on income not e	ffectively connected with a U.S. trade or business.	. Add column	s (a)	through (d) of line 1.	4. Enter the total here	and on Form 1040)-NR, line 23a 15	
		Capital Gains and							
sses f	nly the capital gains and from property sales or ges that are from sources	(If necessary, attach statement of	(b) Date acquir 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),	
thin t	he United States and not	descriptive details not shown below)						subtract (d) from (e).	subtract (e) from (d)
sines	ely connected with a U.S. s. Do not include a gain								
	on disposing of a U.S. real y interest; report these								
ins ai	nd losses on Schedule D								
	040). property color or								
port	property sales or								

exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

17 Add columns (f) and (g) of line 16

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

. .

17 (

SCHE	DULE	ΟΙ
(Form	1040-N	R)

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074

Answer all of	auestions.
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Department of the Treasury Internal Revenue Service		
Name shown on Form 1040-N		

Name s	hown on Form 1040-NR				Your identifying number	
SAI	LAKSHMI ROHAN PENDYA	ALA			016-71-4670	
Α	Of what country or countries w					
в	In what country did you claim	residence for tax purpose	s during the tax year?	United States		
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) of	the United States? .	🗌 Yes 👂	No
D	Were you ever:	5 (I	,			
					🗌 Yes 👂	No
	A green card holder (lawful per					No
	If you answer "Yes" to (1) or (2					
Е	If you had a visa on the last of immigration status on the last of	day of the tax year, enter	your visa type. If you		•	
F	Have you ever changed your v If you answered "Yes," indicat	risa type (nonimmigrant sta	tus) or U.S. immigratio	n status?	🗌 Yes 🛛	🛾 No
G	List all dates you entered and	left the United States durin	a 2023. See instruction	ns.		
-	Note: If you're a resident of C		-		ent intervals,	
	check the box for Canada or				Mexico	
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy		te entered United State mm/dd/yy	s Date departed United S mm/dd/yy	itates
н	Give number of days (including	-			-	
	2021	, 2022	, and 202	23 365	··	
I.	Did you file a U.S. income tax	return for any prior year? .			🗌 Yes 👂	≺ No
	If "Yes," give the latest year ar	nd form number you filed:				
J	Are you filing a return for a true	st?			🗌 Yes 🛛	🛾 No
	If "Yes," did the trust have a l					
	U.S. person, or receive a contr	ribution from a U.S. person	?		· · · · 🗌 Yes 🗌	No
κ	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	the source of this com	pensation?	🗌 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, amount of exempt income in the				claimed the treaty benefit, a	and the
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		
	(e) Total. Enter this amount o	n Form 10/0_NP line 14 P	l In not enter it anywher	l e else on line 1		
2.	Were you subject to tax in a fo				Yes [No
			. ,			
э.	Are you claiming treaty benefit				🗆 tes 🗹	N INO
м	If "Yes," attach a copy of the C	Jompetent Authority deterr	mation letter to your r	etum.		
M	Check the applicable box if:		a a ma fue			
1.	This is the first year you are m	-		-		nected
~	with a U.S. trade or business u					· [_]
2.	You have made an election in States as effectively connected	d with a U.S. trade or busir	ness under section 871	(d). See instructions .	· · · · · · · · · ·	. 🗆
For Pa	perwork Reduction Act Notice,	see the Instructions for Fo	rm 1040-NR. B	AA REV 02/05/24 PRO	Schedule OI (Form 1040-N	R) 2023

Form 8880	
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Department of the Treasury

SAI LAKSHMI ROHAN PENDYALA

Internal Revenue Service Name(s) shown on return

Credit for Qualified Retirement Savings Contributions

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

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

OMB No. 1545-0074

Sequence No. 54

(b) Your spouse

1,125.

Your social security number 016-71-4670

(a) You

1,125.

1,125.

1,125.

1,125.

29,423.

REV 02/05/24 PRO

7

1

2

3

4

5

6

8

10 11 12 You **cannot** take this credit if **either** of the following applies.

• The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$36,500 (\$54,750 if head of household; \$73,000 if married filing jointly).

• 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).

- 1 Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2023. **Do not** include rollover contributions
- **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) . .
- 5 Subtract line 4 from line 3. If zero or less, enter -0-
- 6 In each column, enter the **smaller** of line 5 or \$2,000
- 7 Add the amounts on line 6. If zero, **stop**; you can't take this credit .
- 8 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11*
- 9 Enter the applicable decimal amount from the table below.

If line 8 is—		And your filing status is –					
Over-	But not over—	Married filing jointly	Head of household	Single, Married filing separately, or Qualifying surviving spouse			
	\$21,750	Enter on line 9– 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	.1
\$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 o	credit.			
Itiply line 7	by line 9 .				. 10		113
mitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions				ns 11	1	,649	
		0		maller of line 10 or line 11 l			
d on Sched	ule 3 (Form 104	40), line 4			· 12		113

* 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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Form **8880** (2023)