## 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	r's name	Social securit	Social security number			
PRAN	NAY BABU MULLAPUDI	875-92-	875-92-9429			
Spouse's	s name	Spouse's soc	ial sec	urity numbe	er	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	vear vou a	re au	thorizina	.)	
	whole dollars only on lines 1 through 5.	your you u			<u>')                                    </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1		9,813.	
	Total tax		2		0.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		681.	
	Amount you want refunded to you		4		681.	
	Amount you owe		5			
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 send for any Agent to paymer authoriz paymer busines taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmi my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated to fine fundamental to a payment 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 at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the particular confidential information necessary to answer inquiries and resolve issues related to the particular fundamental information in the particular for the income tax return (original or amended) I are funds Withdrawal Consent.	ction of the tr S. Treasury are cated in the ta n to debit the the authoriza ests must be processing of ayment. I furt	ansmind its of ax preparties of ax preparties of a control of the elements of	ssion, (b) to designated paration so to this according revoke wed no late the ectronic posteriors.	he reason I Financial Iftware for ount. This (cancel) a er than 2 ayment of e that the	
Taxpa:	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate r	2 DINI 2	9 4	4 2 9	00 mv	
	ERO firm name	Ent		digits, but er all zeros	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 amended) I am now if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.					
Your si	ignature ▶ Date ▶					
Snous	e's PIN: check one box only					
	I authorize to enter or generate r	nv PIN			as my	
	ERO firm name	Ent		digits, but	ao my	
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methology.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 0		7 1	
		Don't ente	er all ze	eros		
authoriz	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 subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn 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				

# 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 Jar	1. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, 2	20	See separate instructions.		
Your first name and middle initial			Last name Y			Your iden	our identifying number			
								(see instructions)		
PRANAY BA	ABU		MULLAPUDI					875-92-9429		
Home address (number and street). If you have a P.O. box,				tructions.		•		Apt. no.		
12193 S.	BOL	BOA PARC LANE						#B102		
City, town, or po	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code		
DRAPER						UT	8	4020		
Foreign country	nam	e	Foreign	n province/state/county		Foreign p	ostal code			
Filing	×	☐ Estat	e 🗌 Trust							
Status		ndent:								
Check only	"	,				,				
one box.										
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					(b) sell, ex			
Danandanta	<u> </u>	wise dispose of a digital asset (of a l	manoiai	interest in a digital asset	, (ecc matruotiona.)			qualifies for (see inst.):		
<b>Dependents</b> (see instructions):				(2) Dependent's		1		Credit for other		
(See instructions).		(1) First name Last name		identifying number	(3) Relationship to yo	u Child	tax credit	dependents		
If more than four										
dependents, see							<u> </u>			
instructions and							<u> </u>			
check here							Ц			
Income	1a	Total amount from Form(s) W-2, box	•	•				9,813.		
Effectively	b	Household employee wages not rep		` '			1b			
Connected	C	Tip income not reported on line 1a (		,			1c			
With U.S.	d	Medicaid waiver payments not repo Taxable dependent care benefits fro		` '	,		1d			
Trade or	e f	Employer-provided adoption benefit		·			1e 1f			
Business	g	Wages from Form 8919, line 6	1g							
Attach	9 h	Other earned income (see instructio	1h							
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	i Reserved for future use									
RRB-1042-S,	k Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L,									
and 8288-A here. Also		line 1(e)			1k					
attach	z	Add lines 1a through 1h					1z	9,813.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	<b>b</b> Tax	able interest		2b			
tax was	3a	Qualified dividends 3a	1	<b>b</b> Ord	linary dividends		3b			
withheld.	4a	IRA distributions 4a	a	<b>b</b> Tax	able amount		4b			
If you did not	5a	Pensions and annuities 5a	1	<b>b</b> Tax	able amount		5b			
get a Form W-2, see	6 Reserved for future use									
instructions.	7	Capital gain or (loss). Attach Schedu								
	8	Additional income from Schedule 1								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		9,813.						
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your <b>total adjustments to income</b>									
	11	Subtract line 10 from line 9. This is y	our <b>adju</b>	ısted gross income			11	9,813.		
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard									
		deduction (see instructions)			1 1	ndia Trea	ty <b>12</b>	13,850.		
	13a	Qualified business income deductio								
	b	Exemptions for estates and trusts o								
	C	Add lines 13a and 13b						10.5-1		
	14							13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -U This is your <b>ta</b> :	xable income		15	0.		

Form 1040-NR (	2023)									Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 88	14 <b>2</b> [	4972	2 3			16	0.	
Credits	17	Amount from Schedule 2 (Form 1040), line 3							17	0.	
	18									0.	
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)									
	20	Amount from Schedule 3 (Form 1040), line 8									
	21	Add lines 19 and 20									
	22	Subtract line 21 from line 18. If zero or less, e	enter -0						22	0.	
	23a	Tax on income not effectively connected with	n a U.S. trade o	r business	from						
		Schedule NEC (Form 1040-NR), line 15 .				23a					
	b	Other taxes, including self-employment tax,	from Schedule	2 (Form 1	040),						
		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	0.	
Payments	25	Federal income tax withheld from:									
	а	Form(s) W-2				25a		681.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c							25d	681.	
	е	Form(s) 8805							25e		
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments and amount ap							26		
	27	Reserved for future use				27					
	28	Additional child tax credit from Schedule 881			1	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			i	31					
	32	Add lines 28, 29, and 31. These are your total				ble cr	edits		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The							33	681.	
Refund	34	If line 33 is more than line 24, subtract line 24							34	681.	
	35a	Amount of line 34 you want refunded to you				•	=		35a	681.	
Direct deposit?	b	Routing number   1   0   1   1   0   0   0					ing $\square$				
See instructions.	d	Account number 5 1 8 0 1 0 6			I			Ü			
	е	If you want your refund check mailed to an a			ed State	s not	: shown on	page 1.			
		enter it here.									
	36	Amount of line 34 you want <b>applied to your</b>				36					
Amount	37	Subtract line 33 from line 24. This is the amo			'						
You Owe		For details on how to pay, go to www.irs.gov	//Payments or s	see instruc	tions .				37		
	38	Estimated tax penalty (see instructions) .			.	38					
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								lete be	ow. 🛛 No	
Party	Designee's Phone Personal identi							ication			
Designee	name no number (PIN)										
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Sign	Your signature Date			Your occu	upation			If the	e IRS s	ent you an Identity	
Here						I		PIN, enter it here			
	NET DEVELOPER (see						inst.)				
	Phone	e no.	Email address	<u> </u>							
Paid	Prepa	rer's name Preparer's	signature			Date		PTIN		Check if:	
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY	YA RAM SAGAR	GUPTA T	ALLAM	02/1	1/2024	P02082	2703	Self-employed	
Preparer	Firm's name CTODAT TAYES ITC							Phone n			
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965										

BAA

#### **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

875-92-9429 PRANAY BABU MULLAPUDI 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 C 3 4 5 Real property income and natural resources royalties . . . 6 7 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 16 (a) Kind of property and description (f) LOSS (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 17 Add columns (f) and (g) of line 16 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						
PRAN	RANAY BABU MULLAPUDI					875-92-9429				
Α	Of what country or countries w									
В	Of what country or countries were you a citizen or national during the tax year? <a href="INDIA">INDIA</a> In what country did you claim residence for tax purposes during the tax year? <a href="United States">United States</a>									
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:	Were you ever:								
	A U.S. citizen?									
2.	A green card holder (lawful permanent resident) of the United States?									
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
Е	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	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immig e change:	ration status?		☐ Yes	⊠ No			
G	List all dates you entered and	left the United States during	g 2023. See instru	ictions.						
	Note: If you're a resident of C				_					
	check the box for Canada or				☐ Mexico					
	Date entered United States	Date departed United State	es	Date entered United State		arted Unite	d States			
	mm/dd/yy	mm/dd/yy	<b></b>	mm/dd/yy		nm/dd/yy				
			<del>-</del>							
			<del>  </del>				$\overline{}$			
н	Give number of days (including	vacation nonworkdays and	 I nartial days) you	were present in the United	States during:					
_	2021	, 2022	, and	d <b>2023</b> 365			<b>SZ</b>			
ı	Did you file a U.S. income tax If "Yes," give the latest year ar					∐ Yes	⊠ No			
J	Are you filing a return for a trus	st?				☐ Yes	⊠ No			
	If "Yes," did the trust have a U					_				
	U.S. person, or receive a contr	·				☐ Yes	☐ No			
K	Did you receive total compens					∐ Yes	⊠ No			
	If "Yes," did you use an alternative method to determine the source of this compensation?									
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.									
	<b>(a)</b> Cou	ntry	(b) Tax treaty arti	ths (d) Amount of exempt ears income in current tax year						
	/	E 4040 MB # 27 E								
_	(e) Total. Enter this amount of		-							
	Were you subject to tax in a fo					☐ Yes	∐ No ⊠ Na			
3.	Are you claiming treaty benefit If "Yes," attach a copy of the C		-			∐ Yes	⊠ No			
М	Check the applicable box if:	competent Authority detern	ппаноп тенет то у	our return.						
	This is the first year you are ma									
_	with a U.S. trade or business u	, ,								
2.	You have made an election in States as effectively connected									