Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social coourity number

ERO must obtain and reta
► Go to www.irs.gov/Form887

n completed Form 8879. 9 for the latest information.

Submission Identification Number (SID)

Taypayar'a nama

талрау		Social Security	riumber					
SRA	VANI BOBBILI	824-39-3996						
Spouse	s's name	Spouse's socia	al security number					
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you ar	e 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 5	,142.				
2	Total tax	[2	0.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3	5.				
4	Amount you want refunded to you	[4	5.				
5	Amount you owe	[5					
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	of your retu	rn)				

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

GLOBAL TAXES LLC to enter or generate my PIN
--

Ent	er fiv i't er	/e dia	gits, all ze	but	as my
9	З	9	9	6	

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

X 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 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	t self-selected PIN. 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 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 🕨	
ERO Must Retain Th Don't Submit This Form to t			
For Paperwork Reduction Act Notice, see your tax return instruction	ons. RAA	REV 02/11/24 PRO	Form 8879 (Rev. 01-2021)

1040)-	NR Department of the Treasury-Internal R U.S. Nonresident Alien	evenue Service Income Tax Retu	ırn	2023	ОМВ	No. 15	45-0074		le in this	
For the year Jan	n. 1–	Dec. 31, 2023, or other tax year beginning	, 202	3, er	nding		,	20		e sepa structi	
Your first name	and	middle initial Las	st name						dentifyir	ng nun	
								(see in:	structior	ıs)	
SRAVANI		BC	BBILI					824	-39-3	996	
		ber and street). If you have a P.O. box, see	e instructions.							Apt.	no.
		E ISLAND DR									
	City, town, or post office. If you have a foreign address, also complete spaces below. State						ZIP co				
CORPUS CHRISTI TX Foreign country name Foreign province/state/county Foreign posta							7841	2			
Foreign country	nar		reign province/state/count	ty		FO	reign p	oostal co	de		
Filing Status Check only one box.		Single			surviving spous n is a child but n			Estendent:	state		Trust
Digital Assets		any time during 2023, did you: (a) receive (a erwise dispose of a digital asset (or a finan									🗙 No
Dependents							(4) Che	eck the bo	x if qualif	ies for (see inst.):
(see instructions):		(1) First name Last name	(2) Dependent's identifying number		(3) Relationship to	VOL	Chil	d tax crea		redit fo depenc	
			, , , , , , , , , , , , , , , , , , , ,		(0) Holdhorlip to	jeu					
If more than four]
dependents, see instructions and]
check here											
Income	1a	Total amount from Form(s) W-2, box 1 (s	ee instructions)					. 1 a	1	5,	142.
Effectively	b	Household employee wages not reporte	d on Form(s) W-2					. 1t			
Connected	С	Tip income not reported on line 1a (see i					•				
With U.S.	d	Medicaid waiver payments not reported					•	. 1c			
Trade or	e	Taxable dependent care benefits from F					•	. 1e			
Business	f	Employer-provided adoption benefits fro									
Attach	g h	Wages from Form 8919, line 6 Other earned income (see instructions)						. <u>1</u> g . 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use					•				
SSA-1042-S,	i	Reserved for future use						. 1j			
RRB-1042-S,	, k	Total income exempt by a treaty from Sc			1 1						
and 8288-A here. Also		line 1(e)									
attach	z	Add lines 1a through 1h						. 1z	:	5,	142.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	b T	axab	ole interest			. 2t			
tax was	3a	Qualified dividends 3a			ary dividends .						
withheld.	4a	IRA distributions 4a			ble amount						
If you did not get a Form	5a 6	Pensions and annuities 5a Reserved for future use .			ole amount						
W-2, see	7										
instructions.	8		Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. Th	<i>,</i> .							5,	142.
	10	Adjustments to income from Schedule	-							,	
		-			•	-					
	11	Subtract line 10 from line 9. This is your	adjusted gross income					. 11		5,	142.
	12	Itemized deductions (from Schedule A deduction (see instructions)							2	13,	850.
	13a	Qualified business income deduction fro									
	b	Exemptions for estates and trusts only (s									
	С	Add lines 13a and 13b						. 13	c		
	14									13,	850.
	15	Subtract line 14 from line 11. If zero or le	ss, enter -0 This is your	taxa	ble income .			. 15			0.

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

orm 1040-NR (2023)								Page 2
Fax and	16	Tax (see instructions). Check if an	y from Fo	rm(s): 1 🗌 88	314 2 497	2 3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form	1040), line	3				17	0.
	18	Add lines 16 and 17							0.
	19	Child tax credit or credit for othe	r depend	ents from Sched	ule 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form	1040), line	8				20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If z						22	0.
	23a	Tax on income not effectively co							
		Schedule NEC (Form 1040-NR),				23a			
	b	Other taxes, including self-empl						-	
		line 21	-			23b			
	с	Transportation tax (see instruction				23c		-	
	d	Add lines 23a through 23c	,					23d	
	24	Add lines 22 and 23d. This is you						24	0.
ayments	25	Federal income tax withheld from							<u>, , , , , , , , , , , , , , , , , </u>
ayments	a	Form(s) W-2				25a	F	5.	
	b	Form(s) 1099				25b		<u>'-</u>	
	c	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						25d	5.
	e	Form(s) 8805						25e	<u>.</u>
	f	Form(s) 8288-A						25e	
								25g	
	g	Form(s) 1042-S						259	
	26	2023 estimated tax payments ar		••				20	
	27	Reserved for future use				27		-	
	28	Additional child tax credit from S				28		-	
	29 00	Credit for amount paid with Forr				29	_	_	
	30	Reserved for future use				30		-	
	31	Amount from Schedule 3 (Form	<i>,</i> .			31			1
	32	Add lines 28, 29, and 31. These	-						
	33	Add lines 25d, 25e, 25f, 25g, 26,							5.
efund	34	If line 33 is more than line 24, su				•		_	5.
	35a	Amount of line 34 you want refu			s attached, chec c Type:		. ∟ Savings		5.
ect deposit? e instructions.	b	Routing number 1 1 1 0	5						
	d	Account number 4 8 8 1 1 2 3 0 2 8 4 9							
	е	If you want your refund check m	,						
		enter it here.							
	36	Amount of line 34 you want app	lied to yo	ur 2024 estimat	ed tax	36		_	
mount	37	Subtract line 33 from line 24. Th		•					
ou Owe		For details on how to pay, go to	-	-				37	
	38	Estimated tax penalty (see instru	,			38			
hird	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions.	es. Con	nplete be	elow. 🛛 No
arty	Desig	nee's		Phone no.			nal iden er (PIN)	tification	
esignee	name								
		penalties of perjury, I declare that I ha							
ign		they are true, correct, and complete. E	eciaration						, ,
-	Yours	signature		Date	Your occupation				sent you an Identity
ere					STUDENT			ee inst.)	PIN, enter it here
	Dhar	220		Empil oddroot			(50		
	Phone	e no. rer's name	Prenaror	Email address		Date	PTIN		Chook if:
aid	•		•	Ū				00700	Check if:
reparer		PRIYA RAM SAGAR GUPTA TALLAM		LIA KAM SAGA	R GUPTA TALLAM	02/21/2024		82703	Self-employed
reparer		name GLOBAL TAXES	LLC				Phone	eno. (6	78)965-9522
se Only		address 245 ROONEY C					Firm's		34-3171965

SCHEDULE NEC
(Form 1040-NR)

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Department of the Treasury Internal Revenue Service Name shown on Form 1040-NR

Attachment Sequence No. 7B Your identifying number

2

SRAVANI BOBBILI

824-39-3996

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

		Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
		Nature of Income			(a) 10%	15%	(c) 30%	%	%
1	Dividends and divide	nd 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) tra	ansactions	1c					
2	Interest:		Γ						
а	Mortgage			2a					
b		prations		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		es		7					
8		its		8					
9	-	18 below		9					
10		s of Canada only. Enter net income in column (c).		-					
а	Winnings		1	1					
b				10c					
11	Gambling-Resident Note: Enter winnings	s of countries other than Canada.	[11					
12	Other (specify):								
				12					
13		12 in columns (a) through (d)		13					
14	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	s. Add column	ns (a) t	hrough (d) of line 14	. Enter the total here	e and on Form 1040-	NR, line 23a 15	
		Capital Gains and	l Losses Fr	rom	Sales or Excha	nges of Proper	ty	i	
losses f exchan	nly the capital gains and from property sales or ges that are from sources he United States and not	16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqui 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).
	ely connected with a U.S. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
	y interest; report these nd losses on Schedule D								
(Form 1									
	property sales or ges that are effectively								
connec	ted with a U.S. business								
	edule D (Form 1040), 797, or both.	18 Capital gain. Combine columns (f) and (r-0 18	
					-				

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074 2023

	ent of the Treasury Go Revenue Service	to www.irs.gov/Form1040N Ans	<i>R</i> for instructions wer all questions.	and the latest information	•	Attachment Sequence N	o. 7C
Name sł	hown on Form 1040-NR				Your identifyi	ng number	
SRAV	ANI BOBBILI				824-39-	3996	
Α	Of what country or countries	were you a citizen or nation	al during the tax y	ear? INDIA			
В	In what country did you clain	n residence for tax purpose	s during the tax ye	ear? United States			
С	Have you ever applied to be						
D	Were you ever:						
1.	A U.S. citizen?					Yes	🔀 No
2.	A green card holder (lawful p	ermanent resident) of the Ur	nited States? .			Yes	🔀 No
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation ru	les that apply to you.			
Е	If you had a visa on the last		your visa type. If y	ou didn't have a visa, er	iter your U.S.		
	immigration status on the last	day of the tax year. $F1$				_	
F	Have you ever changed your If you answered "Yes," indica		tus) or U.S. immig			Yes	🗙 No
G	List all dates you entered and	I left the United States durin				••	
	Note: If you're a resident of	Canada or Mexico AND cor	mmute to work in	the United States at frequ	uent intervals	,	
	check the box for Canada o	or Mexico and skip to item I	4	🗌 Canada	🗌 Mexico)	
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es	Date entered United State mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States
н	Give number of days (including	vacation, nonworkdavs, and	d partial days) you y	were present in the United	States during	:	
	2021						
I I	Did you file a U.S. income tax	return for any prior year?				🗙 Yes	🗌 No
	If "Yes," give the latest year a						
J	Are you filing a return for a tru	ust?				Yes	🗙 No
	If "Yes," did the trust have a						
	U.S. person, or receive a con	tribution from a U.S. person	?			Yes	🗌 No
К	Did you receive total compen	sation of \$250,000 or more	during the tax yea	r?		Yes	🛛 No
	If "Yes," did you use an alterr	native method to determine	the source of this	compensation?		Yes	🗌 No
L	Income Exempt From Tax-				tax treaty wi	ith a foreign	country,
	complete (1) through (3) below	w. See Pub. 901 for more in	formation on tax tr	eaties.			
1.	Enter the name of the country				claimed the	treaty benefi	t, and the
	amount of exempt income in t	he columns below. Attach Fo	orm 8833 if require	d. See instructions.			
	(a) Co	untry	(b) Tax treaty arti			mount of exe	
				claimed in prior tax ye	ars income	e in current ta	ax year
	· · · · · · · · · · ·						
	(e) Total. Enter this amount		-				
	Were you subject to tax in a f					Yes	No No
3.	Are you claiming treaty benef	•	•			Yes	🗙 No
	If "Yes," attach a copy of the	Competent Authority deterr	mination letter to y	our return.			
M	Check the applicable box if:		. .				
1.	This is the first year you are r with a U.S. trade or business						

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

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/11/24 PRO Schedule OI (Form 1040-NR) 2023