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	r's name	Social securi	ty numl	per			
VISH	NU VARDHAN PITTALA	761-68	-032	2			
Spouse's	s name	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r vear vou a	re au	thorizina)			
	whole dollars only on lines 1 through 5.	i yeai yeu e	ic au	ti ionzing.)	<u>'</u>		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	17.	717.		
2	Total tax		2	± , ,	388.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		946.		
4	Amount you want refunded to you		4		558.		
	Amount you owe		5		<u> </u>		
Part		keep a cop	y of y	our retur	n)		
my kno return (to send for any Agent to paymer authoriz paymer busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abording or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejedlay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lorinitate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incompart of the financial institution account incompart of the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received as days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) and the incompart of the incompart of the incompart of the payment (PIN) below is my signature for the incompart ax return (original or amended) I and continue for the line of the line o	ve are the am nitter, or electroection of the to J.S. Treasury a licated in the to on to debit the e the authorizquests must be processing or payment. I fur	ounts for the conic reference in the conic reference in the conic received in the conic	from the inc turn originat ssion, (b) the designated I paration soft to this accor To revoke (coved no late ectronic pay	ome tax or (ERO) e reason Financial ware for unt. This cancel) a r than 2 yment of that the		
Тахра	yer's PIN: check one box only						
×	l authorize GLOBAL TAXES LLC to enter or generate	my PIN 8		3 2 2	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	,		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Your s	ignature ▶ Date ▶						
Snous	e's PIN: check one box only						
Ороиз	I authorize to enter or generate	my DINI			as my		
	ERO firm name		ter five	digits, but	as 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 r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below	1					
Part I	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		6 0	8 2 7	1		
		Don't ent	er all ze	eros			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted 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 Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	ırn 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	Do 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				ning, 2023, ending, 20					See separate nstructions.	
Your first name and middle initial			Last name Y					Your identifying number (see instructions)		
VISHNU VA	ARDI	IAN	PITT	ALA			761-68-0322			
Home address (number and street). If you have a P.O. box,				tructions.					Apt. no.	
215 W PHC	ENI	X AVE							517C	
City, town, or p	ost o	ffice. If you have a foreign address, al	so comp	lete spaces below.		State		ZIP co	ode	
FLAGSTAFF	1					AZ		8600	01	
Foreign country	nam	е	Foreig	n province/state/county		Foreign	postal co	de		
	1									
Filing Status	☐ Single ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende							tate	☐ Trust	
Check only one box.										
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					r (b) sell, 		nge, or Yes 🔀 No	
Dependents						(4) Ch	eck the box	- 1	lifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Child t		it (Credit for other dependents	
		(i) i i ot hamo		,	(c) Holadoriomp to ye	-	+			
If more than four							H			
dependents, see instructions and							$\overline{\Box}$			
check here							ī			
Income	1a	Total amount from Form(s) W-2, box	< 1 (see i	nstructions)			. 1a	T	20,217.	
Effectively	b	Household employee wages not rep	•	,						
Connected	С	Tip income not reported on line 1a (` '						
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruct	tions)		. 1d			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e			
Business	f	Employer-provided adoption benefit	ts from F	orm 8839, line 29 .			. 1f			
	g	Wages from Form 8919, line 6					. 1g			
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .		, <u></u>		. 1h			
1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)								
attach	Z	Add lines 1a through 1h					. 1z		20,217.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a		b Tax	cable interest		. 2b			
tax was	3a	Qualified dividends 3a	3	b Ordinary dividends						
withheld.	4a	IRA distributions 4a	_		able amount					
If you did not get a Form	5a	Pensions and annuities 5a			cable amount					
W-2, see	6	Reserved for future use	_							
instructions.	7	Capital gain or (loss). Attach Schedu	•		•			-		
	8	Additional income from Schedule 1							00 017	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8		•				+	20,217.	
	10	Adjustments to income from Sched income					. 10		2,500.	
	11	Subtract line 10 from line 9. This is y	-						17,717.	
	12	Itemized deductions (from Schedu							12 050	
	40	deduction (see instructions)	aty 12		13,850.					
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts of Add lines 13a and 13b			· · · · · · · · · · · · · · · · · · ·		40-			
	с 14								13,850.	
	15	Subtract line 14 from line 11. If zero							3,867.	
		Capitali mio 17 nom mio 11. n Zelo	J. 1033,	ontor or misis your ta	AGDIC HICCHIE .		. 13		<u> </u>	

Form 1040-NR (2	2023)											Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	314 2	4972	3 [16		388.
Credits	17	Amount from Schedule 2 (Form								17		0.
	18	Add lines 16 and 17								18		388.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (For	m 104	0)			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	ero or less	s, enter -0						22		388.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business fr	rom						
		Schedule NEC (Form 1040-NR),	line 15 .			. L	23a					
	b	Other taxes, including self-empl	oyment ta	x, from Schedule	e 2 (Form 104	40),						
		line 21				. L	23b					
	С	Transportation tax (see instruction	ons)				23c					
	d	Add lines 23a through 23c								23d		
	24	Add lines 22 and 23d. This is yo	ur total ta	x						24		388.
Payments	25	Federal income tax withheld from	m:									
	а	Form(s) W-2					25a		946.	_		
	b	Form(s) 1099					25b					
	С	Other forms (see instructions)				_	25c					
	d	Add lines 25a through 25c								25d		946.
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2023 estimated tax payments ar				- 1				26		
	27	Reserved for future use					27			4		
	28	Additional child tax credit from S		` '			28			-		
	29	Credit for amount paid with Forr				-	29					
	30	Reserved for future use					30			-		
	31	Amount from Schedule 3 (Form				_	31	<u> </u>		- 00		
	32 33	Add lines 28, 29, and 31. These	-							32		946.
Defined	34	Add lines 25d, 25e, 25f, 25g, 26 If line 33 is more than line 24, su								33		558.
Refund	35a	Amount of line 34 you want refu					•	-		35a		556. 558.
Direct deposit?	b	Routing number 1 2 2 1			c Type:		Checking			SSa		336.
See instructions.	d	Account number 4 5 7						_	Savings			
						Statos	not she	.i wn on	page 1			
	C	e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.										
	36	Amount of line 34 you want app				T	36			-		
Amount	37	Subtract line 33 from line 24. Th					-					
You Owe		For details on how to pay, go to		=		ons .				37		
rou owe	38	Estimated tax penalty (see instru	_	-		.	38					
Third		ou want to allow another person to				nstruct		☐ Y	es. Comp	lete be	low.	⊠ No
Party	Designee's Phone Personal identity										_	
Designee	name nonumber (PIN)							ioation				
	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 th	e IRS s	ent vo	u an Identity	
Here	Date Tour occupation						I .		-	nter it here		
					STUDENT	1			(see	inst.)		
	Phone		Г _	Email address					T ===		1	
Paid	Prepa	arer's name	Preparer	's signature			Date		PTIN		Chec	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		IYA RAM SAGAF	R GUPTA TAL	LLAM	02/29/	2024	P0208	2703	L∐s	Self-employed
Use Only	Firm's name CIODAI TAVES IIC Phone n									65-9522		
Coc Only	address OAF DOCUTET	TINIOTH OUT	T 00016				Eirm'o E	INI O	1 21	71065		

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

VISHNU VARDHAN PITTALA

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

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

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

•		Sequence No. 01
	Your soci	ial security number
	761_68	-0322

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis governmen	ıt	
	officials. Attach Form 2106		
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction		2,500.
22	Reserved for future use		
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d			
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g	_	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations		
J	Housing deduction from Form 2555	_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	_	
Z	Other adjustments. List type and amount:		
05	Tabal ather addition and Add Gass Ods thus ask Ods	05	
25	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and or	٦	0.500
	Form 1040, 1040-ŠR, or 1040-NR, line 10	26	2,500.

REV 02/16/24 PRO

SCHEDULE NEC (Form 1040-NR)

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

Attachment

Your identifying number

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

OMB No. 1545-0074

VISHNU VARDHAN PITTALA 761-68-0322 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.

Department of the Treasury Internal Revenue Service

OMB No. 1545-0074

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attachment Sequence No. **7C** Answer all questions. Name shown on Form 1040-NR Your identifying number

VI	SHNU VARDHAN PI	761-68-0	0322						
Α	Of what country or c	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 purpose	s during the tax y	ear? United Stat	es			
С	Have you ever appli	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?							
D	Were you ever:								
•	1. A U.S. citizen? .						☐ Yes	⊠ No	
:	2. A green card holder	(lawful pe	rmanent resident) of the Ur	ited States? .			☐ Yes	⊠ No	
	If you answer "Yes"	to (1) or (2	2), see Pub. 519, chapter 4,	for expatriation ru	ules that apply to you.				
Ε	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 year. $F1$								
F									
Г	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?								
G	List all dates you en	List all dates you entered and left the United States during 2023. See instructions.							
_			Canada or Mexico AND cor	-		equent intervals.			
			r Mexico and skip to item h						
	Date entered Unite mm/dd/yy		Date departed United Stat mm/dd/yy	es	Date entered United S mm/dd/yy	tates Date de	parted Unite mm/dd/yy	d States	
Н			vacation, nonworkdays, and						
	2021		, 2022	, an	d 2023365	·		-	
I	Did you file a U.S. in If "Yes," give the late	icome tax est year ar	return for any prior year? . nd form number you filed:				☐ Yes	⊠ No	
J	Are you filing a retur	n for a trus	st?				∐ Yes	⊠ No	
			U.S. or foreign owner unde ribution from a U.S. person				☐ Yes	□No	
Κ	Did you receive tota	l compens	sation of \$250,000 or more	during the tax yea	ar?		☐ Yes	⊠ No	
	-		ative method to determine					☐ No	
L			f you are claiming exempt v. See Pub. 901 for more in			ne tax treaty wit	h a foreign	country,	
•		Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.							
		(a) Cou	intry	(b) Tax treaty art	(c) Number of mo		mount of exe	•	
	_								
	(e) Total. Enter this	amount o	n Form 1040-NR, line 1k. D	l o not enter it any	where else on line 1 .				
:			oreign country on any of the	=			☐ Yes	☐ No	
	•		ts pursuant to a Competent				☐ Yes	⊠ No	
	If "Yes," attach a co	py of the (Competent Authority detern	nination letter to y	our return.				
М	Check the applicable	e box if:							
•			aking an election to treat in under section 871(d). See ir						
2			n a previous year that has d with a U.S. trade or busin						