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

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	/er s name	Social	I security	/ numbe	er
ARI	IN REDDY SAMAPEDDOLLA	59	8-25-	2708	
Spous	e's name	Spous	se's soci	al secur	ity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year	you ar	e auth	norizing.)
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	36,072.
2	Total tax			2	2,447.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		[3	2,845.
4	Amount you want refunded to you			4	398.
5	Amount you owe			5	
Par	t II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a	a copy	of yo	our 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

_		-		FBO firm name	с ,	Ēr
X	I authorize	GLOBAL 7	TAXES	LLC	to enter or generate my PIN	5

5	2	7	0	8	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	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 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 s	Spouse's signature Da Da									
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7 1	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 🕨					
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)			

1040	-N	IR Department of the Treasury-Inter U.S. Nonresident Ali	nal Rever en In	nue Service come Tax Re	turn	2023	OMB No.	1545-0074	IRS Use C or stap	Dnly—Do not write le in this space.		
For the year Jan	. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2	2023, er	nding		, 20		e separate structions.		
Your first name			Last na					Your i	Your identifying number (see instructions)			
ARUN REDD				PEDDOLLA				598	598-25-2708			
		per and street). If you have a P.O. box	, see ins	structions.						Apt. no.		
3701 KETT										101		
	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.			State		ZIP co			
FAIRBORN			_				OH		45324			
Foreign country	nam	e	Foreigi	n province/state/co	unty		Foreigr	n postal co	bae			
Filing Status Check only one box.	S If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende only						E E	state	Trust			
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f										
Dependents							(4) (heck the b	ox if qualifi	ies for (see inst.):		
(see instructions):		(1) First name Last name		(2) Dependent's identifying number		(3) Relationship to	, c	hild tax cre		redit for other dependents		
							you					
If more than four												
dependents, see instructions and										\square		
check here												
Income	1a	Total amount from Form(s) W-2, box	: 1 (see i	nstructions)				. 1a	a '	36,072.		
Effectively	b	Household employee wages not rep	orted or	n Form(s) W-2				. 11	b			
Connected	с	Tip income not reported on line 1a (s	. 10	>								
With U.S.	d	Medicaid waiver payments not report	rted on I	Form(s) W-2 (see ins	structio	ns)		. 10	3 L			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26				. 10	•			
Business	f	Employer-provided adoption benefits from Form 8839, line 29										
Attach	g	Other earned income (see instructions)							3			
Form(s) W-2,	h								ו			
1042-S, SSA-1042-S.	i	Reserved for future use										
RRB-1042-S,	j	Reserved for future use				1 1		. 1				
and 8288-A	k	Total income exempt by a treaty from										
here. Also attach	-	line 1(e) 1 k				36,072.		
Form(s)	z 2a	Tax-exempt interest		· · · · · ·		ole interest			-	30,072.		
1099-R if	za 3a	Qualified dividends 3a				ary dividends .						
tax was withheld.	5a 4a	IRA distributions 4a				ole amount						
If you did not	5a	Pensions and annuities 5a				ole amount						
get a Form	6	Reserved for future use										
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu										
	8	Additional income from Schedule 1 (•						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	s your total effectiv	ely cor	nnected income		. 9		36,072.		
	10	Adjustments to income from Sched	ule 1 (Fo	orm 1040), line 26.	These a	are your total ad	justment	s to 🛛				
		income						. 10)			
	11	Subtract line 10 from line 9. This is y	-	-					I	36,072.		
	12	Itemized deductions (from Schedu deduction (see instructions)							2	13,850.		
	13a	Qualified business income deduction										
	b	Exemptions for estates and trusts or	nly (see i	instructions)		. 13b						
	с	Add lines 13a and 13b						. 13	c			
	14	Add lines 12 and 13c						. 14	<u>۱</u>	13,850.		
·	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is yo	our taxa	ble income .		. 1	5	22,222.		
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate instru	ctions.				Form 1(040-NR (2023)		

Form 1040-NR (2	2023)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	2,447.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17	0.
	18	Add lines 16 and 17	18	3 2,447.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	19)
	20	Amount from Schedule 3 (Form 1040), line 8	20)
	21	Add lines 19 and 20	21	l
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	2,447.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15		
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21 23b		
	с	Transportation tax (see instructions)		
	d	Add lines 23a through 23c	23	d
	24	Add lines 22 and 23d. This is your total tax		2,447.
Payments	25	Federal income tax withheld from:		
. aj monto	а	Form(s) W-2	,845.	
	b	Form(s) 1099	<u> </u>	
	с	Other forms (see instructions)		
	d	Add lines 25a through 25c	25	d 2,845.
	е	Form(s) 8805		
	f	Form(s) 8288-A	25	f
	g	Form(s) 1042-S	25	
	26	2023 estimated tax payments and amount applied from 2022 return	26	•
	27	Reserved for future use		
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28		
	29	Credit for amount paid with Form 1040-C		
	30	Reserved for future use		
	31	Amount from Schedule 3 (Form 1040), line 15		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	2
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid		
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		
Direct deposit?	b		Savings	
See instructions.	d	Account number 7 6 8 1 8 1 1 2 2	Ũ	
	е	If you want your refund check mailed to an address outside the United States not shown on p	bage 1.	
		enter it here.	-	
	36	Amount of line 34 you want applied to your 2024 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	/
	38	Estimated tax penalty (see instructions)		
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See instructions. \Box Yes	s. Complete k	pelow. 🛛 No
Party Designee	Desig name		al identificatio r (PIN)	on
		r penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information		
Sign Here	Your	signature Date Your occupation		sent you an Identity on PIN, enter it here
nere		SOFTWARE DEVELOPER	(see inst.)
	Phone	e no. Email address		
Paid	Prepa	arer's name Preparer's signature Date	PTIN	Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/23/2024	P0208270	3 Self-employed
Preparer			Phone no. (678)965-9522
Use Only	Firm's		Firm's EIN	·
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO		Form 1040-NR (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

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Sequence No. 7B Your identifying number

2

Attachment

598-25-2708

ARUN REDDY SAMAPEDDOLLA

Enter	amount of income und	er the appropriate rate of tax. See instructions.							
	Nature of Income				(a) 10% (b) 15%		(c) 30%	(d) Other	r (specify)
					(4) 1070	(3) 1070	(6) 8878	%	%
1	Dividends and divide	•							
а	Dividends paid by U	.S. corporations		1a					
b	Dividends paid by fo	reign corporations		1b					
С	Dividend equivalent p	payments received with respect to section 871(m) tra	ansactions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corp	orations		2b					
С	Other			2c					
3	Industrial royalties (p	patents, trademarks, etc.)		3					
4	Motion picture or TV	copyright royalties		4					
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6	Real property incom	e and natural resources royalties		6					
7	Pensions and annuit	ies		7					
8	Social security bene	fits		8					
9	Capital gain from line	e 18 below	9						
10	Gambling-Resident	ts of Canada only. Enter net income in column (c). r -0							
а	Winnings								
b	Losses			10c					
11	Gambling-Resident	ts of countries other than Canada.		11					
12	Other (specify):	s only. Losses aren't allowed							
12				12					
13		12 in columns (a) through (d)		13					
13	•	rate of tax at top of each column		13					
		ffectively connected with a U.S. trade or business			through (d) of line 1	4. Enter the total hard	and an Earm 1040	-NR. line 23a 15	
15	Tax on income not e	Capital Gains and							
	only the capital gains and	· · · · ·	L033C3				y	(0) 000	() 0411
losses exchan	from property sales or ges that are from sources the United States and not	16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy		(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).
	vely connected with a U.S. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
gains a	operty interest; report these and losses on Schedule D								
(Form 1	•								
	property sales or ges that are effectively								
connec	edule D (Form 1040),								
	4797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17	7. Ente	r the net gain he	re and on line 9 abo	ve. If a loss, ente	er-0 18	

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

Other Information

Attach to Form 1040-NB

OMB No. 1545-0074

	ent of the Treasury Revenue Service	Go t	o www.irs.gov/Form1040N Ans	<i>R</i> for instructions and wer all questions.	the latest information		Attachment Sequence N	2 .5 0.7C
Name sl	nown on Form 1040	-NR				Your identifyi		
ARUN	I REDDY SAM	IAPEDDOLLA				598-25-	2708	
Α	Of what country	y or countries v	vere you a citizen or nation	al during the tax year?	INDIA			
В	In what country	/ did you claim	residence for tax purpose	s during the tax year?	' United States			
С	•	••	green card holder (lawful p	permanent resident) of	the United States? .		Yes	🛛 No
D	Were you ever:						_	.
	A U.S. citizen?							🗙 No
2.	-		rmanent resident) of the Ur				Yes	🗙 No
_	-		2), see Pub. 519, chapter 4,					
Е	immigration sta	sa on the last (day of the tax year, enter y	your visa type. It you	didn't nave a visa, en	ter your 0.5.		
F			day of the tax year. <u>F1</u> <i>r</i> isa type (nonimmigrant sta	tuo) or LLS immigrati			Yes	🗙 No
г	If you answered	d "Yes " indicat	the date and nature of th	e change:				
G	List all dates vo	u entered and	left the United States durin	a 2023. See instructio	 nns			
			Canada or Mexico AND cor	•		ent intervals		
			r Mexico and skip to item I			Mexico		
	Date entered mm/o	United States dd/yy	Date departed United Stat mm/dd/yy	es Da	ate entered United State mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States
Н			vacation, nonworkdays, and , 2022			-		
I	Did you file a U	.S. income tax	return for any prior year? . nd form number you filed:					🗌 No
J	Are you filing a If "Yes," did th	return for a tru e trust have a l	st?	r the grantor trust rul	es, make a distributior	or loan to a	Yes	🛛 No
к			sation of \$250,000 or more					
IX.	•	•	ative method to determine	• •				
L	Income Exemp	t From Tax-I	f you are claiming exempt . See Pub. 901 for more in	ion from income tax	under a U.S. income			
1.			the applicable tax treaty art			claimed the	treatv benefi	it. and the
••			ne columns below. Attach Fo				licaly solio.	.,
		(a) Cou	intry	(b) Tax treaty article	(c) Number of month		mount of ex	
					claimed in prior tax ye		e in current ta	ax year
			n Form 1040-NR, line 1k. D					
2.	Were you subje	ect to tax in a fo	preign country on any of the	e income shown in 1(c	l) above?		Yes	🗌 No
3.	Are vou claimin	a treatv benefit	ts pursuant to a Competen	t Authoritv determinat	ion?		Yes	🗙 No

If "Yes," attach a copy of the Competent Authority determination letter to your return.

Check the applicable box if: Μ

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected

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 03/07/24 PRO Schedule OI (Form 1040-NR) 2023