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.

Submission Identification Number (SID)

Taxpaver's name

l'axpayer's name		Social security number	
SAI HEMANTH VARMA CHALLA		849-54-2061	
Spouse's name	Spouse's social security number		
Part I Tax Return Information – Tax Year Endin	g December 31, 2023 (Ente	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 4,51	.6.
2 Total tax			0.
3 Federal income tax withheld from Form(s) W-2 and Forr	m(s) 1099	· · · · 3 22	29.
4 Amount you want refunded to you		· · · · 4 22	29.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Auth	orization (Be sure you get and	keep a copy of your return)	
Inder penalties of perium. I declare that I have examined a copy of th	e income tax return (original or amender	d) I am now authorizing and to the be	set of

Under penalties of perjury, 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

X	I authorize	GLOBAL	TAXES	ERO firm name	to enter or generate my PIN	Er
Χ	l authorize	GLUBAL	TAXES		to enter or generate my PIN	Er

4	2	0	6	1	26 mV
			gits, all ze		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

Enter five digits, but

don't enter all zeros

as mv

signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

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—cont	nue be	low						
Part III Certification and Authentication – Practitioner PIN Method On	ly							
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	. 2	2	2		 0 8	_	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 🕨								
Do	ERO Must Retain This Forn on't Submit This Form to the IRS									
Fax Demonstruction Act Nati										

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

REV 03/07/24 PRO

1040)-	VR Department of the Treasury-Inter U.S. Nonresident Al	nal Reven	uue Service come Tax Retu	rn	2023	OMB	No. 15	45-0074	or sta	ole in thi	
For the year Jar	n. 1–	Dec. 31, 2023, or other tax year beginr	ing	, 2023	3, en	ding		,	20		ee sep nstruct	
Your first name			1	Last name Your identifying numb (see instructions)								
SAI HEMAN	JTH	VARMA	CHALLA 849-54-2061									
Home address ((nun	ber and street). If you have a P.O. box	<, see instructions.							Apt.	no.	
1919 WIND												
City, town, or po	ost (ffice. If you have a foreign address, al	so complete spaces below. State					ZIP co				
MARIETTA			GA					30067				
Foreign country	nar	le	Foreigr	n province/state/county	/		Foi	reign p	oostal co	ode		
Filing Single Married filing s Status Status Status Status					-	surviving spous				state		Trust
Check only one box.	- I	you checked the QSS box, enter the o	child's na	ame if the qualifying pe	rson	is a child but n	ot you	r depe	endent:	-		
Digital Assets		any time during 2023, did you: (a) rece erwise dispose of a digital asset (or a t										🗙 No
Dependents	1			(2) Dependent's				(4) Ch	eck the bo			(see inst.):
(see instructions):	-	(1) First name Last name		identifying number	(3) Relationship to	you	Chil	d tax cre	dit	Credit fo depen	
]
If more than four dependents, see]
instructions and]
check here]
Income	1a	Total amount from Form(s) W-2, box	•	,						-	4,	516.
Effectively	b	Household employee wages not rep										
Connected	с С	Tip income not reported on line 1a (
With U.S. Trade or	d e	Medicaid waiver payments not repo Taxable dependent care benefits fro						·	. 10 . 16			
Business	f	Employer-provided adoption benefit					• •	•	. 11			
Dusiness	g	Wages from Form 8919, line 6						÷				
Attach	h	Other earned income (see instructio										
Form(s) W-2, 1042-S,	i	Reserved for future use										
SSA-1042-S,	j	Reserved for future use							. 1 j			
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	· ·		•					<u> </u>	4,	516.
Form(s) 1099-R if	2a	Tax-exempt interest 2a				le interest			-			
tax was	3a	Qualified dividends 3a				ry dividends .				-		
withheld. If you did not	4a 5a	IRA distributions 44 Pensions and annuities 56				le amount le amount						
get a Form	5a 6	Reserved for future use								,		
W-2, see	7	Capital gain or (loss). Attach Schedu										
instructions.	8	Additional income from Schedule 1	•	, ,		•						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	•	<i>,</i> .							4,	516.
	10	Adjustments to income from Sched	ule 1 (Fo	-	se a	re your total a d	ljustm	nents	to)		
	11	Subtract line 10 from line 9. This is y	our adju	isted gross income					. 11		4	,516.
	12	Itemized deductions (from Schedu deduction (see instructions)								2	13,	,850.
	13a	Qualified business income deductio	n from Fo	orm 8995 or Form 899	5-A	. 13a						
	b	Exemptions for estates and trusts o	nly (see i	nstructions)		. 13b						
	С	Add lines 13a and 13b							. 13	c		
	14								-	-	13,	850.
	15	Subtract line 14 from line 11. If zero		enter -0 This is your t		ole income .		•	. 15		040 -	0.

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

Form 1040-NR (2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 28814 2 497	2 3		16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			17	0.
	18	Add lines 16 and 17			18	0.
	19	Child tax credit or credit for other dependents from Schedule 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 zero or less, enter -0			22	0.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a			
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), 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	229.		
	b	Form(s) 1099	25b			
	с	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c			25d	229.
	е	Form(s) 8805			25e	
	f	Form(s) 8288-A			25f	
	g	Form(s) 1042-S			25g	
	26	2023 estimated tax payments and amount applied from 2022 return			26	
	27	Reserved for future use	27			
	28	Additional child tax credit from Schedule 8812 (Form 1040)	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	31			
	32	Add lines 28, 29, and 31. These are your total other payments and refundation	ble credits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .			33	229.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount	t you overpaid		34	229.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, chec	khere	🗆	35a	229.
Direct deposit?	b	Routing number 0 1 1 9 0 0 2 5 4 c Type: ⊠	Checking	Savings		
See instructions.	d	Account number 3 8 5 0 3 0 2 4 5 0 2 6				
	е	If you want your refund check mailed to an address outside the United State	es not shown or	n page 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)	38			
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See instru-	ctions. 🗌 Y	es. Comp	lete below.	🔀 No
Party	Desig	nee's Phone	Perso	nal identif	ication	
Designee	name	no	numb	er (PIN)		
0		penalties of perjury, I declare that I have examined this return and accompanying schedu they are true, correct, and complete. Declaration of preparer (other than taxpayer) is base				
Sign	Your	signature Date Your occupation				ou an Identity
Here			CINEED		ection PIN, e	nter it here
-	Disas	NETWORK EN	GINEER	(see	inst.)	
	Phone	e no. Email address arer's name Preparer's signature	Date	PTIN	Che	ok if:
Paid	•					ск IT: Self-employed
Preparer		1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA	03/20/2024	P02082		
Use Only		s name <u>GLOBAL TAXES LLC</u> s address 245 ROONEY CT E BRUNSWICK NJ 08816		Phone n		965-9522
		rm 10.40ND for instructions and the latest information		Firm's E		
GO TO WWW.Irs.	j0v/F0l	rm1040NR for instructions and the latest information. BAA	REV 03/07/24 PF	KO (Form 1	040-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

Attachment Sequence No. 7B

2

SAI HEMANTH VARMA CHALLA

Your identifying number 849-54-2061

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

		Natura of Incomo			(a) 10%	(b) 15%	(c) 30%	(d) Other	r (specify)
		Nature of Income			(a) 10%	(d) 15%	(C) 30%	%	%
1	Dividends and divide	end equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by fo	ds paid by foreign corporations		1b					
с	Dividend equivalent p		ransactions	1c					
2	Interest:	ividends paid by foreign corporations . ividend equivalent payments received with respect to section 871(m) transaction							
а	Mortgage			2a					
b				2b					
с				2c					
3				3					
4				4					
5				5					
6			6						
7			7						
8			8						
9	-		9						
10	Gambling—Besidents of Canada only. Enter net income in column (c)								
а				1					
b				10c					
11				11					
12									
				12					
13				13					
14	•			14					
15					hrough (d) of line 14	4. Enter the total here	and on Form 1040)-NR. line 23a 15	
losses t exchan	only the capital gains and 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	(b) Date acqu mm/dd/yy	uired	(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).
effectiv	ely connected with a U.S.								
	ss. Do not include a gain on disposing of a U.S. real								
propert	ty interest; report these								
(Form 1	nd losses on Schedule D 1040).								
	property sales or								
connec	iges that are effectively cted with a U.S. business	17 Add columns (f) and (g) of line 16					17	()	
	edule D (Form 1040), 1797, or both.								
	,		3, 5 11	0	gain nor				1

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

	ent of the Treasury Revenue Service	Go t	Attachment					
	nown on Form 1040	-NR	All5	wer all questions.		Your identifyin	Sequence N	0.70
	HEMANTH VA		2			849-54-2	-	
A			vere you a citizen or nation	al during the tax year?				
В			residence for tax purpose					
С			green card holder (lawful p				Yes	🛛 No
D	Were you ever:							
1.	A U.S. citizen?						Yes	🛛 No
2.	A green card ho	older (lawful pei	rmanent resident) of the Ur	ited States?			🗌 Yes	🛛 No
	If you answer "							
Е	If you had a vis immigration stat	er your U.S.						
F	Have you ever of If you answered			🗙 No				
G	List all dates yo	ou entered and	left the United States durin	g 2023. See instructio	ons.			
	Note: If you're	a resident of C	anada or Mexico AND cor	nmute to work in the	United States at freque	ent intervals,		
	check the box	for Canada or	Mexico and skip to item H	<u>1.</u> <u>.</u>	🗌 Canada	Mexico		
	Date entered mm/c		Date departed United Stat mm/dd/yy	es Da	ate entered United States mm/dd/yy	Date dep	oarted Unite mm/dd/yy	d States
н			vacation, nonworkdays, and		-	-		
	2021		, 2022	, and 20	23 365	··		
I			return for any prior year?.				∐ Yes	🗙 No
	Are you filing a	return for a true	nd form number you filed: st?				Yes	🗙 No
J			J.S. or foreign owner unde					
			ribution from a U.S. person				🗌 Yes	No
к	•		ation of \$250,000 or more				☐ Yes	⊠ No
			ative method to determine t					
L	Income Exemp	t From Tax—If	you are claiming exemption See Pub. 901 for more int	ion from income tax	under a U.S. income t		h a foreigr	
1.			the applicable tax treaty art			claimed the t	reatv benefi	it. and the
			e columns below. Attach Fo				,	,
		(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax yea		nount of ex	
								-
			n Form 1040-NR, line 1k. D	-				
	• •		reign country on any of the					🗌 No
3.	•		s pursuant to a Competent	•			∐ Yes	🗙 No
			Competent Authority detern	nination letter to your	return.			
M	Check the appl		aking an alaction to tract in	nome from real property	why located in the Linite	d States es d	ffootivoluo	opposted
1.			aking an election to treat in under section 871(d). See ir					

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

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