IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treesury	► ERO mus
Department of the Treasury	
Internal Revenue Service	► Go to www

st obtain and retain completed Form 8879. v.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Тахра	yer's name	Social security	Social security number				
ANU	JRAG SIRUMALLA	833-19-	3566				
Spous	e'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	r 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 10,507.				
2			2 0.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 329.				
4	Amount you want refunded to you	[4 329.				
5	Amount you owe	[5				

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

X I authorize GLOBAL TAXES LLC to enter or generate my P	X
--	---

Enter five digits, but don't enter all zeros							
	9	3	5	6	6		

my

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

to	enter	or	generate	mv	PIN
ιO	enter	0I	yenerale	IIIY	

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 – Pr	actitioner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by y	bur five-digit 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 This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So							
For Denerwork Deduction Act Nation and your		Earm 8870 (Pay 01 2021)					

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

1040)-	NR Department of the Treasury-Internal F U.S. Nonresident Alien	Revenue Service	rn	20 23	ОМВ	No. 15	45-0074	or sta	ple in thi	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 Your first name and middle initial Last name You								20		ee sep nstruct	
Your first name	and	middle initial La	Last name Yo				Your identifying number				
								(see in	structio	ns)	
ANURAG			IRUMALLA					833	-19-3	3566	
		ber and street). If you have a P.O. box, se	e instructions.							Apt.	no.
1520 FAIR										<u> </u>	
		office. If you have a foreign address, also c	omplete spaces below.				ate		ZIP co		
NAPERVILL Foreign country			reign province/state/county	,		II		ostal co	6050	63	
i oreigii country	nan		reigh province/state/county	y			reigin p	05101 00	Jue		
Filing											
Status Check only one box.	IS If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:										Trust
Digital Assets	At a oth	any time during 2023, did you: (a) receive (a erwise dispose of a digital asset (or a finar	as a reward, award, or payr ncial interest in a digital ass	ment et)?	t for property or (See instruction	servio s.)	ces); oi	(b) sell, 	excha	nge, or Yes	🗙 No
Dependents							(4) Che	eck the bo	ox if qual	ifies for ((see inst.):
(see instructions):		(1) First name Last name	(2) Dependent's identifying number		(3) Relationship to	VOU	Chil	d tax credit		Credit for other dependents	
				+	() Holdstonip to	<u> </u>					1
If more than four				1]
dependents, see instructions and]
check here]
Income	1a	Total amount from Form(s) W-2, box 1 (s	see instructions)			• •		. 1a	1	10,	507.
Effectively	b	Household employee wages not reporte)		
Connected	С	Tip income not reported on line 1a (see									
With U.S.	d	Medicaid waiver payments not reported				• •		. 10			
Trade or	e f							. <u>1</u> e . 11			
Business	f g	Wages from Form 8919, line 6						· !! 1ç			
Attach	9 h	Other earned income (see instructions)									
Form(s) W-2, 1042-S,	i	Reserved for future use							-		
SSA-1042-S,	j	Reserved for future use						. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from So	chedule OI (Form 1040-NR)	, iter	n L, 📔 📗						
here. Also		line 1(e)			. 1k						
attach Form(s)	z	Add lines 1a through 1h						-	:	10,	507.
1099-R if	2a	Tax-exempt interest 2a			le interest						
tax was withheld.	3a	Qualified dividends 3a			ary dividends .				-		
If you did not	4a 5a	IRA distributions			le amount				-		
get a Form	5a 6	Reserved for future use						-			
W-2, see instructions.	7	Capital gain or (loss). Attach Schedule D							_		
instructions.	8	Additional income from Schedule 1 (For									
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. Th								10,	507.
	10	Adjustments to income from Schedule	1 (Form 1040), line 26. The		•	-)		
	11	Subtract line 10 from line 9. This is your								10,	,507.
	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 (
	с	Add lines 13a and 13b						. 13	c		
	14								<u> </u>	13,	850.
	15	Subtract line 14 from line 11. If zero or le	ess, enter -0 This is your t	axal	ble income .	<u> </u>		. 15		0.40 -	0.

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

Form **1040-NR** (2023)

Form 1040-NR (2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1	'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			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:				
Fayments	20 a	Form(s) W-2	25a	329.		
	b	Form(s) 1099	25b	525.		
	c	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c . <th></th> <th></th> <th>25d</th> <th>329.</th>			25d	329.
		5		-	250 25e	529.
	e r	Form(s) 8805				
	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		-	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .			33	329.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amour	•		34	329.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, chec		· 🗆 🛓	35a	329.
Direct deposit?	b		Checking	Savings		
See instructions.	d	Account number 8 3 0 2 2 9 3 1 3				
	е	If you want your refund check mailed to an address outside the United State	es not shown on	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. 🗌 Ye	es. Complet	te below.	X No
Party	Desig	nee's Phone	Persor	nal identifica	ation	
Designee	name		numbe	er (PIN)		
	Under	penalties of perjury, I declare that I have examined this return and accompanying schedu	ules and statements	s, and to the l	best of my kno	wledge and
-	belief,	they are true, correct, and complete. Declaration of preparer (other than taxpayer) is base	ed on all informatio	n of which pr	eparer has any	knowledge.
Sign	Your	signature Date Your occupation			RS sent you	,
Here					tion PIN, ent	er it here
		SOFTWARE E	INGINEER	(see in	ist.)	
	Phon			D.711		
Paid	Prepa	arer's name Preparer's signature	Date	PTIN	Check	
Preparer	SYAN	1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA	03/31/2024	P020827	703 🗌 Se l	f-employed
Use Only	Firm's	s name GLOBAL TAXES LLC		Phone no.	(678)96	5-9522
	Firm's	saddress 245 ROONEY CT E BRUNSWICK NJ 08816		Firm's EIN		
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information. BAA	REV 03/07/24 PR	0	Form 104	0-NR (2023)

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

ANURAG SIRUMALLA

833-19-3566

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

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
					(a) 10%	(b) 15%	(C) 30%	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by for	reign corporations		1b					
с	Dividend equivalent p	ments received with respect to section 871(m) transactions							
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	prations		2b					
с	Other			2c					
3	Industrial royalties (p	atents, trademarks, etc.)	3						
4	Motion picture or TV	copyright royalties	4						
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7	Pensions and annuiti	es		7					
8	Social security benef	ïts		8					
9		e 18 below		9					
10									
а	Winnings								
b	Losses			10c					
11	Note: Enter winnings	s of countries other than Canada.		11					
12	Other (specify):								
				12					
13	0	12 in columns (a) through (d)	+	13					
14		ate of tax at top of each column		14					
15	Tax on income not ef	ffectively connected with a U.S. trade or business.						NR, line 23a 15	
		Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyy		(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	nd losses on Schedule D								
(Form 1									
exchan	property sales or ges that are effectively								
	eted with a U.S. business edule D (Form 1040),								
	1797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17.	. Ente	r the net gain here	e and on line 9 abo	ove. If a loss, enter	r-0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service			to www.irs.gov/Form1040N	<i>IR</i> for instructions and swer all questions.		Attachment		
			Ans	swer all questions.		V	Sequence N	o. /C
	hown on Form 1040 RAG SIRUMAL					Your identifyin 833-19-	•	
ANOF			were you a citizen or natior	al during the tax year?	τνρτλ			
В	In what country	, did vou claim	residence for tax purpose	s during the tax year?	United States			
c	Have you ever	applied to be a	green card holder (lawful	permanent resident) of	the United States?		Yes	No
D	Were you ever:	• •	gi com calla mora or (la mar					
1.	A U.S. citizen?						☐ Yes	🗙 No
2.	A green card ho		rmanent resident) of the U					🛛 No
	If you answer "	Yes" to (1) or (2	2), see Pub. 519, chapter 4	, for expatriation rules t	hat apply to you.			
Е	If you had a vis immigration sta	ter your U.S						
F			visa type (nonimmigrant sta te the date and nature of th	atus) or U.S. immigratio	n status?		Yes	🛛 No
G	List all dates yo	ou entered and	left the United States durin	ng 2023. See instruction	ns.			
			Canada or Mexico AND co					
			r Mexico and skip to item			Mexico		
	Date entered mm/o	United States dd/yy	Date departed United Sta mm/dd/yy	tes Da	te entered United State mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States
н	Give number of	dave (including	vacation, nonworkdays, an	d partial days) you woro	procent in the United 9	Statos durina		
••			, 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 the	return for a tru e trust have a	st?	er the grantor trust rule	s, make a distribution	or loan to a		🛛 No
к	-		sation of \$250,000 or more					
i v	-		ative method to determine					
L	Income Exemp	t From Tax-I	f you are claiming exemp v. See Pub. 901 for more in	tion from income tax ι	under a U.S. income			
1.	amount of exem	npt income in th	the applicable tax treaty ar ne columns below. Attach F	orm 8833 if required. S	ee instructions.		-	
		(a) Cou	intry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		mount of exe in current ta	
_			n Form 1040-NR, line 1k. I	-				
2. 3.	Are you claimin	g treaty benefi	preign country on any of th ts pursuant to a Competen Competent Authority deter	t Authority determination	on?		☐ Yes ☐ Yes	□ No ⊠ No
м	Check the appl		Competent Authority deter	finitiation letter to your f	elum.		<i>(</i> , , , , , ,	

BAA

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