## 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

	3731143 3311133						
Submis	sion Identification Number (SID)						
Taxpayer'	's name		Social securit	y numbe	r		
SRIN	ITHA PASIKANTI	834-55-	834-55-4336				
Spouse's	name	Spouse's soc	Spouse's social security number				
Doubl	Toy Detuya Information Toy V	Vacua Fradinas Parasmahas 24		مالد ده هد	\		
Part I		ear Ending December 31, 2023 (E	enter year you a	re autr	iorizing.)		
	whole dollars only on lines 1 through 5.	in and 1 0 0 and 5 blank					
	form 1040-SS filers use line 4 only. Leave li			4	E	0.63	
	Total tax			2	٥,	063.	
		V-2 and Form(s) 1099		3			
				4		<u>7.</u>	
				5			
Part I		ture Authorization (Be sure you get a			ur retur	n)	
		d a copy of the income tax return (original or ame					
return (o to send of for any control Agent to payment authorized payment business taxes to personal	riginal or amended) I am now authorizing. I consider my return to the IRS and to receive from the IRS delay in processing the return or refund, and (c) initiate an ACH electronic funds withdrawal (direct of my federal taxes owed on this return and/or ation is to remain in full force and effect until I to the total must contact the U.S. Treasury Financial Actions of the payment (settlement) date. It is receive confidential information necessary to I identification number (PIN) below is my signature.	elete. I further declare that the amounts in Part I sent to allow my intermediate service provider, traces (a) an acknowledgement of receipt or reason for the date of any refund. If applicable, I authorize rect debit) entry to the financial institution account a payment of estimated tax, and the financial institution to term Agent at 1-888-353-4537. Payment cancellation also authorize the financial institutions involved in answer inquiries and resolve issues related to the forthe income tax return (original or amended).	ansmitter, or electron rejection of the traction to debit the contract of the authorization requests must be an the processing of the payment. I furt	onic return ansmiss and its de ax preparentry to ation. To be received the electrical than acknowledge and the second and the	rn origination, (b) the esignated Fration soft this according revoke (ced no late etronic paynowledge	or (ERO) e reason inancial ware for unt. This cancel) a r than 2 yment of that the	
	ic Funds Withdrawal Consent.  ver's PIN: check one box only						
X	lauthorize GLOBAL TAXES LLC	to enter or gene	rate my PINI 5	4 3	3 6	as my	
	ERO firm	name	ř Ent	er five di		as my	
	signature on the income tax return (origin	al or amended) I am now authorizing.	40.		0.00		
	if you are entering your own PIN and you below.	e income tax return (original or amended) I a ur return is filed using the Practitioner PIN r					
Your sig	gnature - Srinitha	Date	<b>▶</b> 04/02/2024				
Spouse	e's PIN: check one box only						
Spouse	I authorize	to ontox ox gono	rata my DINI				
	ERO firm	to enter or gener	-	er five di	aits but	as my	
	signature on the income tax return (origin			n't enter			
		e income tax return (original or amended) I a ur return is filed using the Practitioner PIN r					
Spouse	e's signature ▶	Date	•				
	Practitioner	PIN Method Returns Only—continue be	elow				
Part II	Certification and Authentication	Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN follower	ed by your five-digit self-selected PIN.	2 2 2 4 9 Don't ente		8 2 7 os	1	
authorize	ed to file for tax year indicated above for the ta	is my signature for the electronic individual incor axpayer(s) indicated above. I confirm that I am s 345, Handbook for Authorized IRS e-file Providers	submitting this retu	ırn in ac	cordance		
ERO's s	signature ►	Date	<b>&gt;</b>				
		t Retain This Form — See Instruction					
	Don't Submit Thi	s 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 Jar	n. 1–C	Dec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	·,	20	See separate instructions.		
Your first name and middle initial								Your identifying number (see instructions)		
SRINITHA			,					834-55-4336		
Home address (number and street). If you have a P.O. box,							001	Apt. no.		
1672 GINKGO CT							268			
City, town, or post office. If you have a foreign address, also complete spaces below.							ZIP code			
KENT								44240		
Foreign country name Foreign province/state/county Foreign posta										
Filing Status	1	Single		ate  Trust	t					
Check only one box.	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:									
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					r (b) sell, e		lo.	
Dependents						(4) Ch	eck the box	if qualifies for (see in	st.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(2) Deletionship to you		d tax credi	t Credit for othe	r	
		(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents	_	
If more than four										
dependents, see									_	
instructions and check here							$\exists$			
Income	1a	Total amount from Form(s) W-2, box	( 1 (see i	nstructions)			. 1a	5,063		
Effectively	b	Household employee wages not rep	`	,				3,000	•	
Connected	c	Tip income not reported on line 1a (								
With U.S.	d	Medicaid waiver payments not repo								
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit		•			. 1f		_	
240000	g	Wages from Form 8919, line 6	. 1g							
Attach	h	Other earned income (see instruction	ns) .				. 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					. 1j			
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	5,063	3.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	<b>b</b> Tax	able interest		. 2b			
tax was	За	Qualified dividends 3a	a	<b>b</b> Ord	linary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	1	<b>b</b> Tax	able amount		. 4b			
If you did not	5a	Pensions and annuities 5a	a	<b>b</b> Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use								
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	. 9	5,063	<u> </u>					
	10	Adjustments to income from Sched income	. 10							
	11	Subtract line 10 from line 9. This is y		5,063	<u></u> 3.					
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard								_	
		deduction (see instructions)				ndia Tre	aty <b>12</b>	13,850	) <b>.</b>	
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts of								
	C	Add lines 13a and 13b								
	14 15			ontor O. This is your <b>to</b>				13,850		
	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income						.   15	1	).	

Form 1040-NR (2	2023)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814 2	4972	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 (Fo	rm 104	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 10	040),					
		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		7.		
	b	Form(s) 1099		25b				
	С	Other forms (see instructions)		25c				
	d	Add lines 25a through 25c					25d	7.
	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 re	fundal	ble cre	dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total paymer	nts .				33	7.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the	amount	you <b>o</b>	verpaid		34	7.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached	l, checl	k here			35a	7.
Direct deposit?	b	Routing number   0   4   1   0   0   0   1   2   4   <b>c</b> Type:	$\times$	Checki	ng 🗌	Savings		
See instructions.	d	Account number 4 1 7 3 6 8 4 4 5						
	е	If you want your refund check mailed to an address outside the United	d State	s not s	 hown 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 <b>amount you owe</b> .						
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instruct	ions .				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	instruc	tions.	□ Ye	es. Comp	lete be	low. 🛛 No
Party	Designee's Phone Personal identif						fication	
Designee								
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							
Sign	Your	signature Date Your occu	pation			If th	e IRS s	ent you an Identity
Here								PIN, enter it here
	GRADUATE STUDENT (see						inst.)	
	Phone	e no. Email address						
Paid	Prepa	rer's name Preparer's signature		Date		PTIN		Check if:
	SYAM	1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GU	JPTA	04/03	3/2024	P0208	2703	Self-employed
Preparer	Firm's name CIODAL TAYES IIC						no. (6	78) 965-9522
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN							

BAA

#### **SCHEDULE NEC** (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number SRINITHA PASIKANTI 834-55-4336 Enter amount of income under the appropriate rate of tax. See instructions

		Nature of Income			<b>(a)</b> 10%	(b) 150/	(c) 30%	(d) Other	(specify)
	Nature of income				(a) 10%	<b>(b)</b> 15%	(C) 30%	%	%
1	Dividends and divide	end 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) tran	nsactions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	orations		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	Real property income	e and natural resources royalties		6					
7	Pensions and annuiti	es		7					
8	Social security benef	fits		8					
9									
10	Gambling – Residents of Canada only. Enter net income in column (c).  If zero or less, enter -0								
а	Winnings								
b		<u> </u>		10c					
11	Note: Enter winnings	s of countries other than Canada. s only. Losses aren't allowed		11					
12	Other (specify):								
				12					
13	_	12 in columns (a) through (d)		13					
14		ate of tax at top of each column		14					
15	Tax on income not e	ffectively connected with a U.S. trade or business.						-NR, line 23a <b>15</b>	
		Capital Gains and I	Losses F	rom	Sales or Excha	anges of Proper	ty	ı	
Enter only the capital gains and losses from property sales or exchanges that are from sources 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).		(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu 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).
	property sales or								
exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17 Add columns (f) and (g) of line 16					17	( )	
		18 Capital gain. Combine columns (f) and (g)	of line 17	. Ente	er the net gain her	e and on line 9 abo			

#### **SCHEDULE OI** (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Answer all questions.

OMB No. 1545-0074 Attachment

Internal Revenue Service Sequence No. 7C Name shown on Form 1040-NR Your identifying number 834-55-4336 SRINITHA PASIKANTI Of what country or countries were you a citizen or national during the tax year? INDIA Α In what country did you claim residence for tax purposes during the tax year? India В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . Were you ever: X No Yes 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules 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 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . . . . . . . . . Yes If you answered "Yes," indicate the date and nature of the change: List all dates you entered and left the United States during 2023. See instructions. G Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States **Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 \_\_\_\_\_\_, 2022 \_\_\_\_\_\_, and 2023 \_\_\_\_\_\_349 \_\_\_\_. ☐ Yes X No ı If "Yes," give the latest year and form number you filed: X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a No Yes ⊠ No Κ Yes If "Yes," did you use an alternative method to determine the source of this compensation? . . . . . . . . . . . . ☐ No Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 . . . 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? . . . . . . . . . . . . No Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return.

Check the applicable box if:

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