## 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

Submission Identification Number (SID)					
Taxpayer's name	Social securit	y number			
SRAVANI THOOMUGANTI	809-72-				
Spouse's name		Spouse's social security number			
Part I Tax Return Information — Tax Year Ending December 31, 2023 (En	 ter year you a	re 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	1.		
2 Total tax		2	0.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			
4 Amount you want refunded to you		4			
5 Amount you owe		5	0.		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	d keep a cop	of your return	)		
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institut authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or general 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 if you are entering your own PIN and your return is filed using the Practitioner PIN metabelow.	rejection of the tree U.S. Treasury andicated in the taution to debit the late the authorizate equests must be the processing of the payment. I furt I am now authorite the my PIN	ansmission, (b) the matrix designated Firex preparation softwentry to this accountation. To revoke (car received no later in the electronic paymer acknowledge the racknowledge the received no later in the electronic paymer acknowledge the racknowledge the rackn	reason nancial vare for nt. This ncel) a than 2 nent of nat the ole, my		
Your signature ▶ Date ▶	04-	05-2024			
Spouse's PIN: check one box only					
I authorize to enter or general	te my PINI		as my		
ERO firm name	-	er five digits, but	13 IIIy		
signature on the income tax return (original or amended) I am now authorizing.	dor	't enter all zeros			
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.					
Spouse's signature ▶ Date ▶					
Practitioner PIN Method Returns Only—continue belo	w				
Part III Certification and Authentication — Practitioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 er all zeros	1		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sul requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of	bmitting this retu	rn in accordance w			
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 Ja	n. 1–D	ec. 31, 2023, or other tax year beginn	ing		, 2023,	ending	,	20	instructions.
Your first name and middle initial				ame	Your ide (see instr	ntifying number ructions)			
SRAVANI				MUGANTI				809-	72-3344
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.					Apt. no.
10 HURON	AVE								1M
City, town, or p	ost o	fice. If you have a foreign address, als	so comp	lete spaces belo	w.		State	Z	ZIP code
JERSEY C	TTY						NJ	(	07306
Foreign country	/ nam	e	Foreigi	n province/state/	county		Foreign <sub>I</sub>	oostal cod	e
Filing Status		Single Married filing sepa	☐ Esta	ate 🗌 Trust					
Check only one box.									
Digital Assets	At a othe	ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f							xchange, or .
Dependents	3						(4) Ch	eck the box	if qualifies for (see inst.):
(see instructions)	:	(1) First name Last name		(2) Depender identifying nur		(3) Relationship to yo	Chi	d tax credit	Credit for other dependents
		(I) I I St Hame		idontifying ridi		(b) Helationship to yo	u		dependents
If more than four	-								
dependents, see	-							$\overline{\Box}$	<del>                                     </del>
instructions and check here									+
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)		l .		. 1a	
Effectively	b	Household employee wages not rep	`	,					
Connected	c	Tip income not reported on line 1a (s		. ,					
With U.S.	d	Medicaid waiver payments not report		•				. 1d	
Trade or	е	Taxable dependent care benefits fro		. ,		*		. 1e	
Business	f	Employer-provided adoption benefit		•				. 1f	
Business	g	Wages from Form 8919, line 6						. 1g	
Attach	h	Other earned income (see instruction						. 1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	•						
SSA-1042-S,	j	Reserved for future use						. 1j	
RRB-1042-S,	k	Total income exempt by a treaty from	n Sched	lule OI (Form 104	0-NR).	item L.			
and 8288-A here. Also		line 1(e)				1k			
attach	z	Add lines 1a through 1h						. 1z	
Form(s)	2a	Tax-exempt interest 2a	ı		<b>b</b> Tax	kable interest		. 2b	
1099-R if tax was	За	Qualified dividends 3a			<b>b</b> Ord	dinary dividends		. 3b	
withheld.	4a	IRA distributions 4a	ı		<b>b</b> Ta	kable amount		. 4b	
If you did not	5a	Pensions and annuities 5a	1		<b>b</b> Tax	kable amount		. 5b	
get a Form	6	Reserved for future use						. 6	
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if requi	ed. If n	ot required, check he	re [	7	
	8	Additional income from Schedule 1	Form 10	040), line 10 .				. 8	1.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	s your <b>total effec</b>	tively o	onnected income .		. 9	1.
	10	Adjustments to income from Sched income	,	,,		,			
	11	Subtract line 10 from line 9. This is y	our <b>adj</b> u	usted gross inco	me			. 11	1.
	12	Itemized deductions (from Schedu	,	,,				I	
		deduction (see instructions)							13,850.
	13a	Qualified business income deduction	n from F	orm 8995 or Fori	n 8995	-A . <b>13a</b>			
	b	Exemptions for estates and trusts or	nly (see i	instructions) .		13b			
	С	Add lines 13a and 13b						. 13c	
	14	Add lines 12 and 13c						. 14	13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is	your <b>ta</b>	xable income		. 15	0.

Form 1040-NR (	2023)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from For	m(s): <b>1</b> 88	314 <b>2</b> [	497	2 <b>3</b>			16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line							17	0.
	18	Add lines 16 and 17							18	0.
	19	Child tax credit or credit for other depende	ents from Sched	ule 8812 (F	orm 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	s, enter -0						22	0.
	23a	Tax on income not effectively connected w	rith a U.S. trade o	or business	from					
		Schedule NEC (Form 1040-NR), line 15 .				23a				
	b	Other taxes, including self-employment tax	x, from Schedule	e 2 (Form 1	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				
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amount							26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Schedule 8	812 (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								
	32	Add lines 28, 29, and 31. These are your to	32							
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T	33							
Refund	34	If line 33 is more than line 24, subtract line							34	
	35a	Amount of line 34 you want <b>refunded to y</b>		35a						
Direct deposit?	b	Routing number X X X X X X X				Checking				
See instructions.	d	Account number X X X X X X						J		
	е	If you want your refund check mailed to ar					_	page 1.		
		enter it here.								
	36	Amount of line 34 you want applied to you	ur 2024 estimato	ed tax .		36				
Amount	37	Subtract line 33 from line 24. This is the ar	nount you owe.							
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or	see instruc	tions .				37	0.
	38	Estimated tax penalty (see instructions) .				38				
Third	Do yo	u want to allow another person to discuss t	his return with th	e IRS? See	instruc	ctions.	□ Ye	es. Comp	lete bel	ow. 🗵 No
Party	Designee's Phone Personal identi									
Designee	name nonumber (PIN)									
		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of								
Sign	Your signature Date Your occupation					If th	e IRS s	ent you an Identity		
Here						Prot	ection	PIN, enter it here		
	STUDENT						(see	inst.)		
	Phone		Email address							
Paid	Prepa	rer's name Preparer	s signature			Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA SYAM I	PRIYA RAM S	SAGAR GI	UPTA	04/05/	2024	P0208	2703	Self-employed
•	Firm's	name GLOBAL TAXES LLC						Phone n	io. (6'	78)965-9522
Use Only										4-3171965

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

SRAVANI THOOMUGANTI

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 social security number
809-72-3344

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. Atta	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:			
_	MISC 1.	<b>8z</b> 1.		
9	Total other income. Add lines 8a through 8z		9	1.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter	here and on Form	10	1

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 governr	nent		
	officials. Attach Form 2106		12	
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		15	
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		9a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use	_	22	
23	Archer MSA deduction	🔯	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I 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	Reforestation amortization and expenses	-		
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			
_	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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and			
	Form 1040, 1040-SR, or 1040-NR, line 10	:	26	

#### **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 SRAVANI THOOMUGANTI 809-72-3344 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)					
					(a) 1070	(b) 1370	(6) 30 70	%	%	
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign (	corporations		1b					
С		_	nts received with respect to section 871(m) to		1c					
2	Interest:		, ,							
а	Mortgage				2a					
b			18		2b					
С					2c					
3			s, trademarks, etc.)		3					
4	• "		ight royalties		4					
5	•		, recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7					7					
8					8					
9			elow		9					
10		s of C	anada only. Enter net income in column (c)							
а	Winnings									
b	Losses		<del></del>		10c					
11	Gambling - Resident	s of c	ountries other than Canada.  Losses aren't allowed		11					
12					<u> </u>					
12					12					
13			columns (a) through (d)		13					
14	_		tax at top of each column		14					
15			ely connected with a U.S. trade or busines			through (d) of line 1	Enter the total here	and on Form 1040	-NR. line 23a <b>15</b>	
	Tax on moonic not c	ICCLIV	Capital Gains and						TVI I, IIIIC ZOG	
Enter only the capital gains and losses from property sales or exchanges that are from sources		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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).
	he United States and not		descriptive details not snown below)						Subtract (d) from (e).	Subtract (e) from (d)
effectively connected with a U.S. business. Do not include a gain										
propert	on disposing of a U.S. real y interest; report these									
gains and losses on Schedule D (Form 1040).										
•	property sales or									
exchan	ges that are effectively ted with a U.S. business	47	Add columns (f) and (s) of the 10						1	
on Sch	edule D (Form 1040),		Add columns (f) and (g) of line 16 <b>Capital gain.</b> Combine columns (f) and (							
Form 4	797, or both.	10	Capital gain. Combine columns (t) and (	(g) or line 17	. Ente	a ine nei gain ner	e and on line 9 ab	ove. II a loss, ente	er -0 <b>18</b>	

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

**Other Information** 

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023
Attachment

Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR Your identifying number SRAVANI THOOMUGANTI 809-72-3344 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? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . X No 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 \_\_\_\_\_\_365 \_\_\_\_. ☐ 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 ☐ No If "Yes," did you use an alternative method to determine the source of this compensation? . . . . . . . . . . . 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