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)

Faxpayer's name Social security number					er
SAI LAHARI NARRAVULA	059-83-9236				
Spouse's name	S	pouse	's socia	al secu	rity number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (En	nter ye	ear y	ou ar	e aut	horizing.)
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	142.
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 an	id ke	ep a	сору	of y	our return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) may knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for 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 payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to the financial institution the financial institution to the financial institution the financial instit	above a nsmitte rejecti e U.S. indicat	are th r, or e on of Treas ted in	e amou electror the tra sury and the tax	unts fr nic retr Insmis d its d k prep	from the income tax urn originator (ERO) sion, (b) the reason lesignated Financial aration software for

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	c	Ē	1
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		

Ent	as my				
3	9	2	3	6	
	3 Ent	3 9 Enter fiv	3 9 2 Enter five dig	3 9 2 3 Enter five digits, don't enter all ze	3 9 2 3 6 Enter five digits, but don't enter all zeros

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 my 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 sign	nature Da	ate 🕨									
Practitioner PIN Method Returns Only—continue below											
Part III C	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN/F	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2			6 nter a	 	2	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 🕨			
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.	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)			

1040	-	IR Department of the Treasury-Inter U.S. Nonresident Ali	nal Reven en In	ue Service Come Tax R	eturn	2023	OMB No. 1	545-0074		only—Do not write e in this space.	
For the year Jan	. 1–C	ec. 31, 2023, or other tax year beginn	ing	,	2023, er	nding		20		e separate structions.	
Your first name			Last na					Your i	Your identifying number see instructions)		
SAI LAHAR	I		NARR	AVULA				059	-83-92	236	
Home address (numl	per and street). If you have a P.O. box	, see ins	tructions.				-		Apt. no.	
ATRIUM, 1	202	LINCOLN AVENUE								21	
City, town, or po	ost of	ffice. If you have a foreign address, als	so comp	lete spaces below			State		ZIP cod	de	
CHARLESTO							IL		6192	0	
Foreign country	nam	e	Foreigr	n province/state/co	ounty		Foreign	postal co	ode		
Filing Status Check only one box.		Single Difference Married filing separation of the Single Difference Single Sin				surviving spouse n is a child but no		Esendent:	state	Trust	
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f									
Dependents					_		(4) Cł	eck the bo	i i	es for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to	you Ch	ild tax cree		redit for other dependents	
If more than four dependents, see											
instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	•	,					-	142.	
Effectively	b	Household employee wages not rep									
Connected With U.S.	c d	Tip income not reported on line 1a (s Medicaid waiver payments not report							-		
Trade or	e	Taxable dependent care benefits fro									
Business	f	Employer-provided adoption benefit									
	g	Wages from Form 8919, line 6							J		
Attach Form(s) W-2,	h	Other earned income (see instruction	ıs) .			<u>.</u> .		. 11	۱ 📃		
1042-S,	i	Reserved for future use				. 1i					
SSA-1042-S, RRB-1042-S,	j	Reserved for future use				1 1		. 1 j			
and 8288-A	k	Total income exempt by a treaty from									
here. Also attach	-	line 1(e)						- 1-		142.	
Form(s)	z 2a	Add lines 1a through 1h	1	· · · · · ·		ble interest .					
1099-R if tax was	2a 3a	Qualified dividends 3a	-			ary dividends .			-		
withheld.	4a	IRA distributions 4a	-			ble amount					
lf you did not	5a	Pensions and annuities 5a			b Taxal	ble amount		. 5k)		
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		-						142.	
	10	Adjustments to income from Schedu			• •			. 10)		
	11	Subtract line 10 from line 9. This is y								142.	
	12	Itemized deductions (from Schedu deduction (see instructions)							2	13,850.	
	13a	Qualified business income deduction				1 1			-		
	b	Exemptions for estates and trusts or									
	с	Add lines 13a and 13b		,				. 13	c		
	14								l 🗌	13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is y	our taxa	ble income		. 15	5	0.	
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate instr	uctions.				Form 10	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	1	6 0.
Credits	17	Amount from Schedule 2 (Form 1040), line 3		1	7 0.
	18	Add lines 16 and 17		1	8 0.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)		1	9
	20	Amount from Schedule 3 (Form 1040), line 8		2	0
	21	Add lines 19 and 20		2	1
	22	Subtract line 21 from line 18. If zero or less, enter -0		2	2 0.
	23a	Tax on income not effectively connected with a U.S. trade or business from			
		Schedule NEC (Form 1040-NR), line 15	a		
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),			
		line 21	b		
	с	Transportation tax (see instructions)	lc		
	d	Add lines 23a through 23c		23	Bd
	24	Add lines 22 and 23d. This is your total tax			4 0.
Payments	25	Federal income tax withheld from:			
	а	Form(s) W-2	ia		
	b	Form(s) 1099	ib		
	с	Other forms (see instructions)	ic		
	d	Add lines 25a through 25c		25	ōd
	е	Form(s) 8805		25	5e
	f	Form(s) 8288-A		2	5f
	g	Form(s) 1042-S			ōg
	26	2023 estimated tax payments and amount applied from 2022 return			6
	27	Reserved for future use	7		
	28	Additional child tax credit from Schedule 8812 (Form 1040)	8		
	29	Credit for amount paid with Form 1040-C	9		
	30	Reserved for future use	0		
	31	Amount from Schedule 3 (Form 1040), line 15	1		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable	credits	3	2
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments		3	3
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount yo	ou overpaid	3	4
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check he	ere	. 🗌 🛛	5a
rect deposit?	b	Routing number X X X X X X X X X X X C Type: Che	ecking 🗌 Sa	avings	
ee instructions.	d	Account number X X X X X X X X X X X X X X X X X X X	XX		
	е	If you want your refund check mailed to an address outside the United States no	ot shown on pa	age 1,	
		enter it here.			
	36	Amount of line 34 you want applied to your 2024 estimated tax 36	6		
mount	37	Subtract line 33 from line 24. This is the amount you owe .			
'ou Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions .		3	7 0.
	38	Estimated tax penalty (see instructions)	8		
hird	Do yo	u want to allow another person to discuss this return with the IRS? See instruction	ns. 🗌 Yes.	Complete	below. 🛛 No
Party	Desig	nee's Phone	Personal	identificati	on
esignee	name	no	number ((PIN)	
		penalties of perjury, I declare that I have examined this return and accompanying schedules a			
lian		they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based or	n all information c		, ,
Sign	Yours	signature Date Your occupation			S sent you an Identity
lere		(see inst	on PIN, enter it here		
ŀ	Dhone	STUDENT		(300 115	
	Phone	e no. Email address rer's name Preparer's signature Da	ate D	TIN	Check if:
	•				
aid		PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04	/12/2024 P	0208270	
				Na a .a a	(CRO) 0 CF 0 F0C
Paid Preparer Jse Only	Firm's	nameGLOBAL TAXES LLCaddress245 ROONEY CT E BRUNSWICK NJ 08816		hone no.	<u>(678)965-9522</u> 84-3171965

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Form 4797, or both.

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

059-83-9236

SAI LAHARI NARRAVULA

Enter a	amount of income und	er the a	appropriate rate of tax. See instructions.							
	Nature of Income					(a) 10%	(b) 15%	(c) 30%	(d) Other	r (specify)
						(a) 1070	(b) 1370	(0) 50 / 0	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U	.S. cor	porations		1a					
b	Dividends paid by fo	reign c	corporations		1b					
С	Dividend equivalent p	aymen	ts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	oration	IS		2b					
с	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property incom	e and ı	natural resources royalties		6					
7	Pensions and annuit	ies.			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling-Resident	ts of Ca r -0	anada only. Enter net income in column (c	:).						
а	Winnings									
b	Losses				10c					
11	Gambling-Resident Note: Enter winnings	ts of co s only.	buntries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines						D-NR, line 23a 15	
			Capital Gains and	d Losses I	From	Sales or Excha	anges of Proper	ty		
losses t exchan	nly the capital gains and from property sales or ges that are from sources he 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).
effectiv	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	y interest; report these nd losses on Schedule D									
(Form 1	040).									
	property sales or ges that are effectively									
connec	edule D (Form 1040).	17	Add columns (f) and (g) of line 16					17	()	

. 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0- . .

18

SCHE	DULE	0
(Form	1040-1	NR)

Other Information

OMB No. 1545-0074

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions. 2023 Attachment Sequence No. 7C

Department of the Treasury Internal Revenue Service	
Name about on Form 1040	NI

Name sl	hown on Form 1040-NR				Your identifying	g number				
SAI	LAHARI NARRAVULA				059-83-9					
Α	Of what country or countries were you a citizen or national during the tax year? INDIA									
в	In what country did you claim residence for tax purposes during the tax year? India									
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?									
D	Were you ever:									
							🛛 No			
2.	A green card holder (lawful per	-				Yes	🗙 No			
_	If you answer "Yes" to (1) or (2		-							
E	If you had a visa on the last of immigration status on the last of	day of the tax year. $_{F1}$								
F	Have you ever changed your v			n status?		Yes	🗙 No			
_	If you answered "Yes," indicate									
G	List all dates you entered and		•							
	Note: If you're a resident of C check the box for Canada or				Mexico					
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy		te entered United State mm/dd/yy	s Date dep	arted Unite mm/dd/yy	d States			
		iiiii/dd/yy		mm/dd/yy		iiiii/dd/yy				
н	Give number of days (including	vacation, nonworkdays, and	d partial days) you were	present in the United	States during:					
		, 2022								
I	Did you file a U.S. income tax	return for any prior year? .				🗌 Yes	🛛 No			
	If "Yes," give the latest year an	d form number you filed:								
J	Are you filing a return for a trus	st?				🗌 Yes	🗙 No			
	If "Yes," did the trust have a U					_	_			
	U.S. person, or receive a contr					Yes	🗌 No			
K	Did you receive total compens		• •				X No			
	If "Yes," did you use an alterna			•			No			
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	i a ioreign	country,			
1.	Enter the name of the country,				claimed the tr	eatv benefi	t and the			
	amount of exempt income in th					outy borron	t, and the			
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month	ns (d) Am	nount of exe	empt			
				claimed in prior tax ye		in current ta				
	(a) Total Enterthic amount -	- Form 1040 ND line the D								
n	(e) Total. Enter this amount on Were you subject to tax in a fo		-			Yes	No			
	Are you claiming treaty benefit									
0.	If "Yes," attach a copy of the C						<u> </u>			
м	Check the applicable box if:									
	This is the first year you are ma	aking an election to treat ir	come from real prope	rty located in the Unite	ed States as e	ffectivelv c	onnected			
	with a U.S. trade or business u						· · 🗌			
2.	You have made an election in									
	States as effectively connected									
For Pa	perwork Reduction Act Notice,	see the Instructions for Fo	rm 1040-NR. B	AA REV 03/07/24 PRO	Schedule C)I (Form 104	D-NR) 2023			