### 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)

T.....

Taxpayer's name	Social security number
ARUN KUMAR PENDYALA	742-20-2002
Spouse's name	Spouse's social security number
Dort L Tox Deturn Information Tox Veer Ending December 21 2022 (Enter	
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	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.	
<b>1</b> Adjusted gross income	<b>1</b> 2,500.
<b>2</b> Total tax	<b>2</b> 0.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 228.
4 Amount you want refunded to you	4 228.
<b>5</b> 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
------------	------	-------	-----	-----	------

l authorize GLOBAL TAXES LLC to enter or generate my PIN

0	2	Ŭ	v	2	as my
Ent	-				

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

X

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

		as my
er fiv n't er		

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 ►											
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN	I/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 	6 nter a	 	9	8	9	

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 🕨
	t Retain This Form — See Instructions Form to the IRS Unless Requested To Do So
For Denemoral Deduction Act Nation and Vous to	

<b>1040</b>	)-	VR Department of the Treasury-Inter U.S. Nonresident AI	rnal Revenue Serv ien Income	e Tax Return	2023	OMB No. 15	645-0074	or stap	Dnly—Do not write le in this space.		
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year beginr	ning	, 2023, e	ending	,	20		e separate structions.		
Your first name	and	middle initial	Last name				Your i		ng number		
							(see in	(see instructions)			
ARUN KUMA	٨R		PENDYALA				742	-20-2	002		
Home address (	(nun	ber and street). If you have a P.O. bo	k, see instruction	ns.					Apt. no.		
1221 MEAD									E		
	ost o	ffice. If you have a foreign address, al	so complete spa	aces below.		State		ZIP co			
IRVING				/		TX		7503	8		
Foreign country	nar	le	Foreign provir	nce/state/county		Foreign	postal co	bae			
<b></b>	1										
Filing Status		Single 🛛 Married filing sep	arately (MFS)	🗌 Qualifyin	g surviving spous	e (QSS)	E	state	Trust		
Check only	li	you checked the QSS box, enter the	child's name if t	he qualifying perse	on is a child but n	ot your dep	endent:				
one box.								-			
Digital Assets	At	any time during 2023, did you: (a) rece	ive (as a reward	l, award, or payme	ent for property or	services); c	r (b) sell	, exchan	ge, or		
		erwise dispose of a digital asset (or a							Yes 🗙 No		
Dependents						<b>(4)</b> Ch	eck the be		ies for (see inst.):		
(see instructions):		(1) First name Last name		) Dependent's ntifying number	(3) Relationship to	vou Chi	ld tax cre		redit for other dependents		
		(),		, 0	(-)	<u>, , , , , , , , , , , , , , , , , , , </u>	$\Box$				
If more than four											
dependents, see instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	x 1 (see instruct	ions)			. 1a	3	2,500.		
Effectively	b	Household employee wages not rep	orted on Form(	s) W-2....			. 1k	<b>&gt;</b>			
Connected	С	Tip income not reported on line 1a (						;			
With U.S.	d	Medicaid waiver payments not repo					. 10	ł			
Trade or	е	Taxable dependent care benefits fro					. 10				
Business	f	Employer-provided adoption benefi					. 1				
Attach	g	Wages from Form 8919, line 6					. 10				
Form(s) W-2,	h i	Other earned income (see instruction Reserved for future use					. 11	1			
1042-S, SSA-1042-S,	i	Reserved for future use					. 1				
RRB-1042-S,	, k	Total income exempt by a treaty fro			1 1		· – ·				
and 8288-A here, Also	ĸ	line 1(e)									
attach	z	Add lines 1a through 1h					. 12	2	2,500.		
Form(s) 1099-R if	2a	Tax-exempt interest 2	a	<b>b</b> Taxa	able interest		. 2ł	<b>)</b>			
tax was	3a	Qualified dividends 3	a	<b>b</b> Ord	inary dividends .		. 3ł	>			
withheld.	4a	IRA distributions 4	a	<b>b</b> Taxa	able amount		. 4ł	>			
If you did not	5a	Pensions and annuities 5			able amount						
get a Form W-2, see	6	Reserved for future use						-			
instructions.	7	Capital gain or (loss). Attach Sched			•						
	8	Additional income from Schedule 1						_	2 500		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	-	-				_	2,500.		
	10	Adjustments to income from Scheolincome					. 10	<b>)</b>			
	11	Subtract line 10 from line 9. This is	/our <b>adjusted g</b>	ross income			. 11	I	2,500.		
	12	Itemized deductions (from Schedu deduction (see instructions)						2	13,850.		
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts o		,							
	С	Add lines 13a and 13b									
	14								13,850.		
	15	Subtract line 14 from line 11. If zero					. 1		0.		

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

orm 1040-NR (2	2023)								Page <b>2</b>
fax and	16	Tax (see instructions). Check if any	y from For	m(s): <b>1</b> 🗌 88	314 <b>2</b> 🗌 497	72 <b>3</b>		16	0.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3				17	0.
	18	Add lines 16 and 17						18	0.
	19	Child tax credit or credit for other	r depende	nts from Schedu	ule 8812 (Form 10			19	
	20	Amount from Schedule 3 (Form 1	040), line	8				20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0				22	0.
	23a	Tax on income not effectively cor Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo	yment ta	k, from Schedule	e 2 (Form 1040),	23b			
	с	Transportation tax (see instructio				23c		-	
	d	Add lines 23a through 23c	,					23d	
	24	Add lines 22 and 23d. This is you							0
						· · · · ·		24	0.
ayments	25	Federal income tax withheld from				05.0	228		
	a	Form(s) W-2				25a	220	<b>·</b>	
	b	Form(s) 1099				25b		-	
	C	Other forms (see instructions) .				25c		05-1	228.
	d	Add lines 25a through 25c							220.
	e	Form(s) 8805							
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments an		• •				26	
	27	Reserved for future use				27		_	
	28	Additional child tax credit from S				28		_	
	29	Credit for amount paid with Form				29		_	
	30	Reserved for future use				30		_	
	31	Amount from Schedule 3 (Form 1				31			
	32	Add lines 28, 29, and 31. These a							
	33	Add lines 25d, 25e, 25f, 25g, 26,							228.
efund	34	If line 33 is more than line 24, sub							228.
	35a	Amount of line 34 you want <b>refur</b>							228.
ect deposit? e instructions.	b	Routing number 0 7 4 0			c Type: 🛛 🛛	Checking	Saving	S	
	d	Account number 7 8 6 3							
	е	If you want your refund check me enter it here.							
	36	Amount of line 34 you want appl	ied to you	ır 2024 estimat	ed tax	36			
nount	37	Subtract line 33 from line 24. This		-					
ou Owe		For details on how to pay, go to				1 1		37	
	38	Estimated tax penalty (see instru-				38			
nird	Do yo	u want to allow another person to	discuss th	nis return with th	e IRS? See instru	ictions. 🗌 Ye	es. Con	nplete be	low. 🛛 No
arty esignee	Desig name					numb	er (PIN)		
		penalties of perjury, I declare that I hav							
ign		they are true, correct, and complete. D	eciaration C						, ,
-	Your	signature		Date	Your occupation	1			ent you an Identity PIN, enter it here
ere					AZURE DEVO	PS ENGINE		ee inst.)	Fin, enter it here
-	Phone	200		Email address			(5		
		rer's name	Prenarer'	s signature		Date	PTIN		Check if:
aid	•		•	0	MAR DUDIPALLI			70833	Self-employed
reparer		TA SAI PAVAN KUMAR DUDIPALLI		DAT LAVAN AU	TUDITALII	1			
	1 11 11 5	name GLOBAL TAXES I					Phone		<u>78)965-9522</u>
se Only	Eirm's	address 245 ROONEY C		UNCLUT OF N	T 0001C		Firm's		8-2145487

### SCHEDULE NEC (Form 1040-NR)

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

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

Attach to Form 1040-NR.

OMB No. 1545-0074

23

Department of the Treasury Internal Revenue Service

Sequence No. 7B Your identifying number

6

72

Attachment

Name shown on Form 1040-NR

ARU	IN KUMAR PENDYA	LA							742-20-2	002
Enter	amount of income und	er the a	ppropriate rate of tax. See instructions.					1		
			Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%		r (specify)
			·		_				%	%
1	Dividends and divide									
a	Dividends paid by U				1a					
b		-			1b					
с 2	Interest:	aymen	ts received with respect to section 871(m) tr	ansactions	1c					
2 a					2a					
a b					2a 2b					
c c			••••••		20 20					
3			, trademarks, etc.)		3					
4			ght royalties		4					
5			recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7			· · · · · · · · · · · · · · ·		7					
8	Social security bene	fits .			8					
9	Capital gain from line	e 18 be	elow		9					
10	Gambling-Resident	ts of Ca <b>r -0</b>	anada only. Enter net income in column (c)	).						
а	Winnings									
b	Losses				10c					
11	Gambling—Resident Note: Enter winnings	ts of co	ountries other than Canada. Losses aren't allowed		11					
12										
					12					
13	Add lines 1a through	12 in	columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not e	ffective	ely connected with a U.S. trade or busines						0-NR, line 23a <b>15</b>	
			Capital Gains and	Losses	From	Sales or Excha	anges of Proper	ty		
losses exchan	only the capital gains and from property sales or nges that are from sources the United States and not	sales or rom sources (if necessary, attach statement of description default active active beyon below)			(c) Date sold mm/dd/yyyy	(d) Sales price	<b>(e)</b> 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	vely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	ty interest; report these and losses on Schedule D									
(Form 1	1040).	1						1		1

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

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

**17** Add columns (f) and (g) of line 16

18

. .

17 (

SCHE	DULE	OI
(Form	1040-N	IR)

### **Other Information**

Attach to Form 1040-NR.

OMB No. 1545-0074

	ent of the Treasury Revenue Service	Go t	o www.irs.gov/Form1040N Ans	R for instructions and wer all questions.	the latest information.		Attachment Sequence N	
	own on Form 1040	-NR		•		Your identify		
ARUN	KUMAR PEN	DYALA				742-20-	-2002	
Α	Of what country	y or countries w	vere you a citizen or nation	al during the tax year?	INDIA			
в			residence for tax purpose					
С	Have you ever a	applied to be a	green card holder (lawful p	ermanent resident) of	the United States? .		. 🗌 Yes	🛛 No
D	Were you ever:							
	A U.S. citizen?							🛛 No
2.	0	· ·	rmanent resident) of the Ur				. Yes	🗙 No
_	•	., .	), see Pub. 519, chapter 4,	•			_	
E	immigration sta	tus on the last o	day of the tax year, enter the tax year. <u>F1</u>					_
F	Have you ever of If you answered	changed your v d "Yes," indicat	risa type (nonimmigrant sta e the date and nature of th	tus) or U.S. immigratic e change:	on status?		. 🗌 Yes	🗙 No
G	List all dates yo	ou entered and	left the United States durin	g 2023. See instructio	ns.			
			anada or Mexico AND cor			_		
			Mexico and skip to item I	Ⅰ <u></u>	🗌 Canada		0	
		United States	Date departed United Stat	es Da	te entered United State	s Date d	eparted Unite	d States
	mm/c	аа/уу	mm/dd/yy		mm/dd/yy		mm/dd/yy	
				_				
н	Give number of	days (including	vacation, nonworkdays, and	d partial days) you were	present in the United S	States during	a:	
			, 2022				5	
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	return for a trus	st?				. 🗌 Yes	X No
			J.S. or foreign owner unde					
	U.S. person, or	receive a contr	ribution from a U.S. person	?			· 🗌 Yes	🗌 No
Κ			ation of \$250,000 or more					X No
_			ative method to determine					🗌 No
L			<sup>:</sup> you are claiming exempt v. See Pub. 901 for more in			tax treaty v	vith a foreign	country,
1.			the applicable tax treaty and the columns below. Attach For			claimed the	e treaty benefi	t, and the
		<b>(a)</b> Cou	ntry	(b) Tax treaty article	(c) Number of month		Amount of exe	•
					claimed in prior tax ye	ars incom	ne in current ta	ax year
	(e) Total. Enter	r this amount o	n Form 1040-NR, line 1k. D	o not enter it anywher	e else on line 1			
2.			preign country on any of the	-			. 🗌 Yes	No
3.	Are you claimin	g treaty benefit	s pursuant to a Competen	Authority determinati	on?		. 🗌 Yes	🗙 No
			Competent Authority deterr	nination letter to your i	return.			
M	Check the appl			<b>,</b> .				
1.	This is the first	year you are m	aking an election to treat ir	come from real prope	rty located in the Unite	ed States as	s effectively c	onnected

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

BAA

REV 02/11/24 PRO Schedule OI (Form 1040-NR) 2023