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 se	Social security number				
KARTHIK GOTTIMUKKULA	896-	-53-6654	4			
Spouse's name	Spouse's	s social secu	rity number			
Part I Tax Return Information — Tax Year Ending December 31, 202	23 (Enter year yo	ou are 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	1,	382.		
2 Total tax		. 2		0.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3		4.		
4 Amount you want refunded to you		. 4		4.		
5 Amount you owe		. 5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you g	get and keep a	copy of y	our retur	n)		
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in return (original or amended) I am now authorizing. I consent to allow my intermediate service provide send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reafor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution apayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cance business days prior to the payment (settlement) date. I also authorize the financial institutions invo taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amounts).	der, transmitter, or el son for rejection of torize the U.S. Treasuccount indicated in tial institution to debito terminate the authallation requests mulved in the processing to the payment.	lectronic ret the transmis ary and its on the tax prep t the entry to the receive the of the elections of the elections	urn originatesion, (b) the designated for this according to this according to the formula of the	or (ERO) a reason Financial ware for unt. This cancel) a r than 2 yment of that the		
Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only						
	accepta my DIN	3 6 6	5 5 4			
X I authorize GLOBAL TAXES LLC to enter or	generate my PIN	Enter five	digits, but	as my		
signature on the income tax return (original or amended) I am now authorizing.		don t ente	r all Zeros			
I will enter my PIN as my signature on the income tax return (original or amendatif you are entering your own PIN and your return is filed using the Practitioner below.						
Your signature ▶	Date ►					
Spouse's PIN: check one box only						
	generate my PIN			as my		
ERO firm name	5 ,	Enter five		,		
signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zeros			
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner below.						
Spouse's signature ▶	Date ►					
Practitioner PIN Method Returns Only—continu	ie pelow					
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.	2 2 2 4	9 6 0	8 2 7	1		
Ento o El Mar Ma Entor your on digit El Ma lonowou by your mao digit oon obloctou i ma		t enter all ze	- - -			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individua authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Pro	I income tax return of am submitting this	original or a	amended) I			
ERO's signature ▶	Date ►					
ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Reques						

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 Jan	year Jan. 1-Dec. 31, 2023, or other tax year beginning, 2023, ending, 20					20	See separate instructions.				
				Your ide	Your identifying number see instructions)						
KARTHIK	IK GOTTIMUKKULA 8						896-	53-6654			
Home address ((num	per and street). If you have a P.O. box						Apt. no.			
182 RIVER	SID	E ST									
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	elete spaces below.		State	7	ZIP code			
LOWELL						MA		01854			
Foreign country	nam	е	Foreig	n province/state/county		Foreign p	ostal cod	e			
-											
Filing Status	X	☐ Esta	ate 🗌 Trust								
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					(b) sell, e				
Dependents						(4) Che	ck the box	if qualifies for (see inst.):			
(see instructions):		(1) First name Last name	(2) Dependent's identifying number		(3) Relationship to yo	Chile	d tax credit	Credit for other dependents			
		(i) i i ot hamo		is a sum young warmen	(c) Holadonomp to ye	,,,		П			
If more than four											
dependents, see instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	1,382.			
Effectively	b	Household employee wages not rep	orted or	n Form(s) W-2			. 1b				
Connected	С	Tip income not reported on line 1a (s	see instr	ructions)			. 1c				
With U.S.	d	Medicaid waiver payments not report	rted on F	Form(s) W-2 (see instruct	tions)		. 1d				
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e				
Business	f	Employer-provided adoption benefit		•			. 1f				
Attach	g	Wages from Form 8919, line 6	. 1g								
Form(s) W-2,	h	Other earned income (see instruction	. 1h								
1042-S,	i	Reserved for future use									
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1		. <u>1j</u>				
and 8288-A	k	Total income exempt by a treaty from									
here. Also attach	_	line 1(e)			1k		1-	1,382.			
Form(s)	z 2a	Add lines 1a through 1h	1	1	able interest		. 1z . 2b	1,302.			
1099-R if		Qualified dividends 3a	_		dinary dividends .		3b				
tax was withheld.	оа 4а	IRA distributions 4a			able amount						
If you did not	5a	Pensions and annuities 5a			cable amount						
get a Form	6	Reserved for future use									
W-2, see instructions.	7		edule D (Form 1040) if required. If not required, check here				_				
moti dotiono.	8	Additional income from Schedule 1	. 8								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8		1,382.							
	10	Adjustments to income from Sched income									
	11	Subtract line 10 from line 9. This is y	. 11	1,382.							
12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents deduction (see instructions)								13,850.			
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	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 ta	xable income .		. 15	0.			

Form 1040-NR (2	2023)							Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2	<u> </u>	'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	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 busine	ss 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:								
-	а	Form(s) W-2		25a		4.				
	b	Form(s) 1099		25b						
	С	Other forms (see instructions)		25c						
	d	Add lines 25a through 25c					25d	4.		
	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	32							
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payn	nents .				33	4.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the	ne amour	nt you o	verpaid		34	4.		
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attach	ed, ched	ck here			35a	4.		
Direct deposit?	b	Routing number 0 1 1 0 0 0 1 3 8 c Tyl	oe: 🛛	Checki	ng 🗌	Savings				
See instructions.	d	Account number 4 6 6 0 1 9 8 4 8 6 5 1								
	е	If you want your refund check mailed to an address outside the Un	ited Stat	es 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 amount you owe .								
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instr	uctions .				37			
	38	Estimated tax penalty (see instructions)		38						
Third	Do yo	lete be	low. 🗵 No							
Party	Designee's Phone Personal identification									
Designee	name no number (PIN)									
	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 occupation							ent you an Identity PIN, enter it here		
Here							inst.)	r ir v, critor it riore		
t	Phone									
Doid		e no. Email address urer's name Preparer's signature		Date		PTIN		Check if:		
Paid	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/14/2024 P020					P0208	2703	Self-employed		
Preparer	Firm's name CTODAT TAVES ITC						Phone no. (678) 965-9522			
Use Only		saddress 245 ROONEY CT E BRUNSWICK NJ 0881	Firm's E	(0.0)000000						

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 KARTHIK GOTTIMUKKULA 896-53-6654 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(5) 100/	/I-) 450/	4-1.000/	(d) Other (specify)		
	nature of income		(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits						
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	11 Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed						
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add colun					-NR, line 23a 15	
	Capital Gains and Losses I	From	Sales or Excha	nges of Proper	ty		
losses f	nly the capital gains and rom property sales or ges that are from sources he United States and not		(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).
	ely connected with a U.S. s. 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							
exchan	property sales or ges that are effectively						
connec	ted with a U.S. business 17 Add columns (f) and (g) of line 16						
	18 Capital gain. Combine columns (f) and (g) of line 17	7. Ent	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 18	

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 sl	nown on Form 1040-NR	Your identifying number									
KART	HIK GOTTIMUKKULA				896-53-66	654					
Α	Of what country or countries were you a citizen or national during the tax year? _INDIA										
В	In what country did you claim										
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident)	of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1.	A U.S. citizen?						⊠ No				
2.											
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
Е	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 yearF1										
F	Have you ever changed your v If you answered "Yes," indicate	e the date and nature of the	e change:			∐ Yes	⊠ No				
G	List all dates you entered and	left the United States durin	g 2023. See instruc	ctions.							
	Note: If you're a resident of C										
	check the box for Canada or	-			Mexico						
	Date entered United States	Date departed United Stat mm/dd/yy	es	Date entered United State		arted United	d States				
	mm/dd/yy	ПП/аа/уу	_	mm/dd/yy		nm/dd/yy					
			<u> </u>								
			\dashv								
			-								
н	Give number of days (including	vacation nonworkdays and	l I nartial davs) vou w	vere present in the United	States during:						
••		, 2022									
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.				☐ Yes	⊠ No				
J	Are you filing a return for a trus	st?				☐ Yes	⊠ No				
	If "Yes," did the trust have a l										
	U.S. person, or receive a contr	·				☐ Yes	☐ No				
K	Did you receive total compens					☐ Yes	⊠ No				
	If "Yes," did you use an alterna			•		∐ Yes	☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign	country,				
1.	Enter the name of the country,				claimed the tre	eaty benefit	, and the				
	amount of exempt income in th										
	(a) Cou	ntry	(b) Tax treaty artic		, , ,						
				claimed in prior tax ye	ars income i	n current ta	x year				
	(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it anyw	here else on line 1							
2.	. Were you subject to tax in a foreign country on any of the income shown in 1(d) above?										
3.	. Are you claiming treaty benefits pursuant to a Competent Authority determination?										
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to yo	ur return.							
M	Check the applicable box if:										
1.	This is the first year you are may with a U.S. trade or business u						onnected .				
2.	You have made an election in States as effectively connected										