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	Socia	l security i	number				
LAKSHMI GAYATHRI PINJALA	70	707-40-8263					
Spouse's name		Spouse's social security number					
Port I Toy Poture Information Toy Voca Ending	December 24		. authorisi	ina \			
Part I Tax Return Information — Tax Year Ending	December 31, 2023 (Enter year	you are	authorizi	ing.)			
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, an	nd 5 blank						
1 Adjusted gross income			1	49,431.			
2 Total tax		_	2	4,049.			
3 Federal income tax withheld from Form(s) W-2 and Form(s			3	6,395.			
			4	2,346.			
5 Amount you owe		_	5	2,340.			
Part II Taxpayer Declaration and Signature Author	ization (Be sure you get and keep	а сору	of your r	eturn)			
Under penalties of perjury, I declare that I have examined a copy of the my knowledge and belief, it is true, correct, and complete. I further direturn (original or amended) I am now authorizing. I consent to allow my to send my return to the IRS and to receive from the IRS (a) an acknow for any delay in processing the return or refund, and (c) the date of any Agent to initiate an ACH electronic funds withdrawal (direct debit) entry payment of my federal taxes owed on this return and/or a payment of e authorization is to remain in full force and effect until I notify the U.S. payment, I must contact the U.S. Treasury Financial Agent at 1-888 business days prior to the payment (settlement) date. I also authorize taxes to receive confidential information necessary to answer inquirie personal identification number (PIN) below is my signature for the incor Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC	eclare that the amounts in Part I above are intermediate service provider, transmitter, or eledgement of receipt or reason for rejection refund. If applicable, I authorize the U.S. Tre to the financial institution account indicated stimated tax, and the financial institution to d. Treasury Financial Agent to terminate the a 353-4537. Payment cancellation requests the financial institutions involved in the process and resolve issues related to the payment.	the amou r electroniof the tran asury and in the tax ebit the eluthorization ust be r ssing of the authorizir	nts from the ic return original return origina	e income ta ginator (ERC b) the reason ated Financia in software for account. This ike (cancel) a later than 2 c payment of edge that the pplicable, my			
ERO firm name	to enter or generate my in	Enter	five digits, k	out ´			
signature on the income tax return (original or amended	d) I am now authorizing.	don t	enter all zer	05			
I will enter my PIN as my signature on the income tax if you are entering your own PIN and your return is file below.							
Your signature ▶	Date ▶						
Spouse's PIN: check one box only							
I authorize	to enter or generate my PI	N		as my			
ERO firm name			r five digits, k				
signature on the income tax return (original or amended	d) I am now authorizing.	don't	enter all zer	os			
I will enter my PIN as my signature on the income tax if you are entering your own PIN and your return is file below.							
Spouse's signature ▶	Date ►						
Practitioner PIN Method	Returns Only—continue below						
Part III Certification and Authentication — Practition	ner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five		9 6 on't enter	6 1 9 all zeros	8 9			
I certify that the above numeric entry is my PIN, which is my signature authorized to file for tax year indicated above for the taxpayer(s) indic requirements of the Practitioner PIN method and Pub. 1345 , Handbook	ated above. I confirm that I am submitting	this return	in accorda	ance with the			
ERO's signature ▶	Date ►						
	s Form - See Instructions						
Don't Submit This Form to the	ne IRS Unless Requested To Do So	•					

E1040-NR 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 Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	0	See separate instructions.
Your first name	and i	niddle initial	Last na	ame			Your iden	tifying number
							(see instru	ctions)
LAKSHMI (GAYA	THRI	PINJ	ALA			707-4	0-8263
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
1334 THE	ALA	MEDA						393
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
SAN JOSE						CA	9.	5126
Foreign country	/ nam	e	Foreigr	n province/state/county		Foreign po	ostal code	
-	1							
Filing		Single	arately (N	/IFS) Qualifyi	ng surviving spouse (0	QSS)	☐ Estat	e 🗌 Trust
Status	If	ndent:						
Check only one box.								
Digital Assets	Δ+ 2	ny time during 2023, did you: (a) rece	ive (ac a	reward award or paym	ent for property or ser	vices): or	(b) sell ev	change or
Digital Assets		erwise dispose of a digital asset (or a				,		
Dependents						(4) Chec	ck the box if	qualifies for (see inst.):
(see instructions)		(A) E: .		(2) Dependent's	(a) D	Child	tax credit	Credit for other
		(1) First name Last name		identifying number	(3) Relationship to you	1		dependents
If more than four								
dependents, see instructions and							\vdash	
check here								
Income	1a	Total amount from Form(s) W-2, box	k 1 (see i	nstructions)			1a	49,431.
Effectively	b	Household employee wages not rep	orted or	Form(s) W-2			1b	
Connected	С	Tip income not reported on line 1a (see instr	uctions)			1c	
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruc	tions)		1d	
Trade or	е	Taxable dependent care benefits from	1e					
Business	iness f Employer-provided adoption benefits from Form 8839, line 29							
Attach	g	Wages from Form 8919, line 6					1g 1h	
Form(s) W-2,	Form(s) W-2,							
1042-S, i Reserved for future use								
RRB-1042-S,	J	Total income exempt by a treaty from			1 1		1j	
and 8288-A here. Also	k	line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	49,431.
Form(s)	2a	Tax-exempt interest 2a	1	1	cable interest		2b	•
1099-R if tax was	3a	Qualified dividends 3a	a	b Ord	dinary dividends		3b	
withheld.	4a	IRA distributions 4a	а	b Tax	kable amount		4b	
If you did not	5a	Pensions and annuities 5a	a	b Tax	kable amount		5b	
get a Form W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	•	, .	•			
	8	Additional income from Schedule 1						40 421
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		•			9	49,431.
	10	Adjustments to income from Schedincome	10					
	11	Subtract line 10 from line 9. This is y		49,431.				
	12	Itemized deductions (from Schedu		,				
	-	deduction (see instructions)		13,850.				
	13a	Qualified business income deductio						
	b	Exemptions for estates and trusts o						
	С	Add lines 13a and 13b					13c	
	14							13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	35 , 581.

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any fro	om Forr	m(s): 1	314 2 [4972	2 3			16	4,049.
Credits	17	Amount from Schedule 2 (Form 1040	0), line :	3						17	0.
	18	Add lines 16 and 17								18	4,049.
	19	Child tax credit or credit for other de	epende	nts from Sched	ule 8812 (F	orm 104	10) .			19	
	20	Amount from Schedule 3 (Form 1040	0), line (8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zero	or less	, enter -0						22	4,049.
	23a	Tax on income not effectively connectively	cted wi	th a U.S. trade	or business	from					
		Schedule NEC (Form 1040-NR), line				1	23a				
	b	Other taxes, including self-employm		•	•	, · ·					
		line 21				1	23b				
	C	Transportation tax (see instructions)					23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your to	otal tax				· ·			24	4,049.
Payments	25	Federal income tax withheld from:									
	a	Form(s) W-2					25a		6 , 395.	-	
	b	Form(s) 1099				i i	25b			-	
	C	Other forms (see instructions) Add lines 25a through 25c					25c			054	6,395.
	d	· ·								25d 25e	0,393.
	e f	Form(s) 8805								25e	
		Form(s) 1042-S								25g	
	g 26	2023 estimated tax payments and a								26	
	27	Reserved for future use					27			20	
	28	Additional child tax credit from Sche				1	28			-	
	29	Credit for amount paid with Form 10		` '		1	29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040				i i	31			-	
	32	Add lines 28, 29, and 31. These are	,.					edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33	6,395.
Refund	34	If line 33 is more than line 24, subtra								34	2,346.
	35a	Amount of line 34 you want refunde	d to yo	u . If Form 8888	is attache	d, checl	k here		🗆	35a	2,346.
Direct deposit?	b	Routing number 3 2 5 0 7	7 0	7 6 0	c Type	e: 🗌	Check	ing 🗵	Savings		
See instructions.	d	Account number 3 9 9 1 3	3 1	5 8 3 0							
	е	If you want your refund check maile	d to an	address outsid	le the Unite	ed State	s not s	shown or	page 1,		
		enter it here.								_	
	36	Amount of line 34 you want applied					36				
Amount	37	Subtract line 33 from line 24. This is		-							
You Owe		For details on how to pay, go to www	_	-		1				37	
	38	Estimated tax penalty (see instruction					38				
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.									low. 🗵 No	
Party Designee	Designee's Phone Personal identific							ication			
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 schedules are statements.								- 1 4 -	.f	
		they are true, correct, and complete. Decla									
Sign	Your signature			Date Your occupation				If the IRS sent you a		ent vou an Identity	
Here				Pate Tour occupation						PIN, enter it here	
					STUDEN	JT			(see	inst.)	
	Phone			Email address					T		
Paid	Prepa	rer's name Pre	eparer's	s signature			Date		PTIN		Check if:
Preparer	eparer VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI Firm's name CLOBAL TAVES IIC						P0247	0833	Self-employed		
Use Only							Phone n		78) 965-9522		
	Firm's	address 245 ROONEY CT	E BR	UNSWICK N	J 08816	5			Firm's E	IN 8	8-2145487

BAA

SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Form 4797, or both.

Name shown on Form 1040-NR

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

Your identifying number

LAKSHMI GAYATHRI PINJALA 707-40-8263 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). 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). Report property sales or exchanges that are effectively connected with a U.S. business 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040). 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

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

vame	snown on Form 1040-NR				Your identifying						
LAK	SHMI GAYATHRI PINJAL	A			707-40-82	263					
Α	Of what country or countries v	vere you a citizen or nationa	al during the tax ye	ear? INDIA							
В	In what country did you claim residence for tax purposes during the tax year? United States										
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?										
D	Were you ever:			,							
1.	A U.S. citizen?										
	A green card holder (lawful permanent resident) of the United States?										
	2. A green card holder (lawful permanent resident) of the United States?										
E	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				-						
F	Have you ever changed your v		tus) or U.S. immia	ration status?		☐ Yes	⊠ No				
-	If you answered "Yes," indicat	te the date and nature of the	e change:								
G	List all dates you entered and	left the United States during	a 2023. See instru	ctions.							
<u> </u>	Note: If you're a resident of C				ent intervals.						
	check the box for Canada or				Mexico						
	Date entered United States	Date departed United State	es	Date entered United State	s Date depa	rted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy		nm/dd/yy					
			-								
н	Give number of days (including	vacation, nonworkdays, and	I partial days) you v	were present in the United S	States during:						
		, 2022									
ı	Did you file a U.S. income tax	return for any prior year?.				X Yes	☐ No				
	If "Yes," give the latest year ar										
J	Are you filing a return for a true	st?				☐ Yes	⊠ No				
	If "Yes," did the trust have a										
	U.S. person, or receive a cont					☐ Yes	☐ No				
K	Did you receive total compens	sation of \$250,000 or more	during the tax yea	r?		☐ Yes	⊠ No				
	If "Yes," did you use an alterna					☐ Yes	☐ No				
L	Income Exempt From Tax-If	f you are claiming exempti	on from income t	ax under a U.S. income	tax treaty with	a foreign	country,				
	complete (1) through (3) below	v. See Pub. 901 for more inf	ormation on tax tr	eaties.							
1.	Enter the name of the country,				claimed the tre	aty benefi	t, and the				
	amount of exempt income in the	ne columns below. Attach Fo	orm 8833 if require	d. See instructions.							
	(a) Cou	ıntry	(b) Tax treaty arti			nount of exempt					
				claimed in prior tax ye	ars income in	in current tax year					
	 										
_	(e) Total. Enter this amount o		=								
2.											
3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?										
	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
M	Check the applicable box if:										
1.	, ,					ectively c	onnected				
_	with a U.S. trade or business u						· · 📙				
2.	You have made an election in										
	States as effectively connecte	u with a 0.5. trade or busin	ess under section	or i(u). See instructions.			<u> Ц</u>				