## 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				
SAI VENKAT DABBARA		891-60-3012				
Spouse's name		Spouse's social security number				
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	nter 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		<b>1</b> 7,640.				
2 Total tax		2 0.				
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 28.				
4 Amount you want refunded to you		4 28.				
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer						
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trato 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 payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution account is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business 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	or rejection of the trace to the U.S. Treasury are trace to the trace	ansmission, (b) the reason of its designated Financial ax preparation software for entry to this account. This action. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the zing and, if applicable, my				
	. 511					
X I authorize GLOBAL TAXES LLC to enter or generation between the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but n't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN r below.						
Your signature ▶ Date	<b>-</b>					
Snouse's DIN shock one havenly						
Spouse's PIN: check one box only	rata my DINI	00 my				
I authorize to enter or gener	,	er five digits, but				
signature on the income tax return (original or amended) I am now authorizing.		n't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN r below.						
Spouse's signature ▶ Date	<b>•</b>					
Practitioner PIN Method Returns Only—continue be	low					
Part III Certification and Authentication — Practitioner PIN Method Only						
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 6 1 9 8 9 er all zeros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incor authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am serequirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retu	rn in accordance with the				
ERO's signature ▶ Date	<b>•</b>					
ERO Must Retain This Form — See Instruction						

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 Jar	or the year Jan. 1-Dec. 31, 2023, or other tax year beginning, 2023, ending					,	20	See separate instructions.		
Your first name and middle initial Last name								Your identifying number		
					(see instructions)					
SAI VENKAT DABBARA 8						891-	891-60-3012			
Home address (number and street). If you have a P.O. box, see instructions.						•	Aı	pt. no.		
1604 SW C	LAY	STREET						2	03	
City, town, or p	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code		
PORTLAND						OR		97201		
Foreign country	nam	e	Foreign	n province/state/county		Foreign <sub>I</sub>	oostal cod	de		
Filing	×	☐ Est	ate [	Trust						
Status	If	endent:								
Check only one box.										
	Λ+ ο	ny time during 2023, did you: (a) recei	(aa a	roward award or naum	ant for property or or	nuicoo): o	r (b) poll (	ovobongo		
Digital Assets		erwise dispose of a digital asset (or a f								
Dependents						(4) Ch	eck the box	if qualifies t	for (see inst.):	
(see instructions):		(N.=.		(2) Dependent's	(2) 5	Chi	d tax credi	T	it for other	
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou		dep	endents	
If more than four										
dependents, see										
instructions and check here										
	10	Total amount from Form(s) W-2, box	, 1 (000 i	notructions)			10		7 <b>,</b> 640.	
Income	1a b	Household employee wages not rep	,	,					7,040.	
Effectively	C	Tip income not reported on line 1a (s								
Connected With U.S.	d	Medicaid waiver payments not report		•						
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit		·			. 16			
Dusiness	g g	Wages from Form 8919, line 6		·			. 1g			
Attach	h	Other earned income (see instruction								
Form(s) W-2, 1042-S,	i	Reserved for future use	,							
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040-NR), i	tem L,					
here. Also		line 1(e)			1k					
attach	z	Add lines 1a through 1h					. 1z		7,640.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	_	<b>b</b> Tax	kable interest		. 2b			
tax was	3a	Qualified dividends 3a	1	<b>b</b> Ord	dinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	_		kable amount					
If you did not get a Form	5a	Pensions and annuities 5a	_		kable amount					
W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Schedu	•	, .	•	_				
	8	Additional income from Schedule 1			7 (10					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8		•					7,640.	
Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to										
income									7,640.	
	12	Itemized deductions (from Schedu							,, 010.	
	14	deduction (see instructions)						1	3,850.	
	13a	Qualified business income deduction					12	<u> </u>		
	b	Exemptions for estates and trusts or								
	c	Add lines 13a and 13b					. 13c			
	14								3,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b>	xable income .	<u> </u>			0.	

Form 1040-NR (2	2023)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s):	<b>1</b> 🗌 881	4 <b>2</b>	497	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	n Schedule	e 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, enter	-0						22	0.
	23a	Tax on income not effectively connected with a U.S	3. trade or	business	from					
		Schedule NEC (Form 1040-NR), line 15				23a				
	b	Other taxes, including self-employment tax, from	Schedule 2	2 (Form 1	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		28.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	28.
	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							26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Schedule 8812 (Fo				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	32							
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are							33	28.
Refund	34	If line 33 is more than line 24, subtract line 24 from							34	28.
11014114	35a	Amount of line 34 you want refunded to you. If Fo	35a	28.						
Direct deposit?	b	Routing number 3 2 5 0 7 0 7 6			e: 🛛			Savings		
See instructions.	d	Account number 9 1 3 9 8 9 1 7	<del></del>		$\top$			3-		
	е	If you want your refund check mailed to an address		the Unite	ed State	s not	∹ shown on	page 1.		
		enter it here.								
	36	Amount of line 34 you want applied to your 2024				36				
Amount	37	Subtract line 33 from line 24. This is the <b>amount y</b>	ou owe.							
You Owe		For details on how to pay, go to www.irs.gov/Payn	nents or se	ee instruc	ctions .				37	
	38	Estimated tax penalty (see instructions)				38				
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.   Yes. Comp								lete be	low. 🗵 No
Party	Designee's Phone Personal identifi									
Designee	name nonumber (PIN)									
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which									
Sign	Your	signature Date	1	our occi	upation			If th	e IRS s	ent you an Identity
Here	1001	Jaco - Ja	'	000	apation					PIN, enter it here
	STUDENT							(see	inst.)	
	Phone	e no. Email a	address					•		
Daid	Prepa	rer's name Preparer's signat	ure			Date		PTIN		Check if:
Paid	VENK?	TA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI P.	AVAN KUM	AR DUDI	PALLI			P0247	0833	Self-employed
Preparer	Firm's name CIODAI TAVES IIC									
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's Ell									8-2145487

BAA

#### **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 SAI VENKAT DABBARA 891-60-3012 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) 10%	(b) 15%	(C) 30%	%	%		
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.	.S. cor	porations		1a					
b	Dividends paid by fo	reign o	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m)	transactions	1c					
2	Interest:	•	,							
а	Mortgage				2a					
b	~ ~		ns		2b					
С					2c					
3			s, trademarks, etc.)		3					
4	• "		right royalties		4					
5	Other royalties (copy	rights,	, recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8	Social security benef	fits .			8					
9	Capital gain from line 18 below				9					
10	Gambling—Resident	ts of C <b>r -0</b>	anada only. Enter net income in column	(c).						
а	Winnings									
b	Losses				10c					
11	Note: Enter winnings	s only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					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	ffectiv	ely connected with a U.S. trade or busing						-NR, line 23a <b>15</b>	
			Capital Gains a	nd Losses F	rom	Sales or Excha	inges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		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).
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real y interest; report these									
gains a	nd losses on Schedule D									
(Form 1	040). property sales or									
exchan	ges that are effectively									
	ted with a U.S. business edule D (Form 1040),									
Form 4797, or both.		18	Capital gain. Combine columns (f) and	d (g) of line 17	'. Ente	er the net gain her	e and on line 9 abo	ove. If a loss, ente	er -0 <b>18</b>	

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

Department of the Treasury

Internal Revenue Service

#### **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

Attachment Sequence No. **7C** 

Name s	Name shown on Form 1040-NR  Your identifying number										
SAI	VENKAT DABBARA		891-60-3012								
Α	Of what country or countries w										
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 p	ermanent resident	) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:           A U.S. citizen?										
	1. A U.S. citizen?										
2.	A green card holder (lawful per		Yes	⊠ No							
_	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 value of your answered "Yes," indicate	risa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immigi e change:	ration status?		☐ Yes	⊠ No				
G	List all dates you entered and	left the United States durin	g 2023. See instru	ctions.							
	Note: If you're a resident of C				_						
	check the box for Canada or				☐ Mexico						
	Date entered United States	Date departed United State	es	Date entered United State		arted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	'	mm/dd/yy					
			<del> </del>								
н	Give number of days (including	vacation nonworkdays and	 I nartial days) you y	vere present in the I Inited	States during:						
••	2021			•	•						
ı	Did you file a U.S. income tax					⊠ Yes	☐ No				
	If "Yes," give the latest year ar										
J	Are you filing a return for a trus					☐ 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	. See Pub. 901 for more inf	formation on tax tr	eaties.	-						
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the				
	<b>(a)</b> Cou	ntry	(b) Tax treaty artic	cle (c) Number of month claimed in prior tax ye	1 , ,						
	7										
_	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
			☐ Yes	∐ No ⊠ No							
3.	Are you claiming treaty benefit If "Yes," attach a copy of the C		-			∐ Yes	⊠ No				
м	Check the applicable box if:	Joinpetent Authority detern	illiation letter to yo	our return.							
	This is the first year you are ma										
^	with a U.S. trade or business under section 871(d). See instructions										
2.	States as effectively connected										