Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpaver's name

Тахрау	er's name	Social securi	ity number							
SAI	NAGA VENKATA SANTOSHI NITYA BANDARU	166-73	-5572							
Spouse	s's name	Spouse's soc	cial security nur	nber						
Par	Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)									
Enter	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	12,020.						
2	Total tax		2	0.						
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1,136.						
4	Amount you want refunded to you		4	1,136.						
5			5							
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)									

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

X I authorize	GLOBAL TAXES LLC	to enter or generate my PIN $^{ m L}$
---------------	------------------	---------------------------------------

	3	5	5	7	2				
Enter five digits, but don't enter all zeros									

my

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

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv 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 signation	ature Da	ate 🕨	•							
Practitioner PIN Method Returns Only—continue below										
Part III C	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.						 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 🕨	
	e Instructions s Requested To Do So		
For Donorwork Doduction Act No		DEV 02/07/24 DDO	Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

1040)-	NR Department of the Treasury-Inter U.S. Nonresident AI	rnal Revenu ien Inc	e Service	2023	OMB No.	545-0074	or stap	Only-Do not write ole in this space.
For the year Jan	າ. 1–	Dec. 31, 2023, or other tax year beginr	ning	, 2023,	ending		, 20		ee separate structions.
Your first name	and	middle initial	Last nai	ne	Your identifying number (see instructions)				
SAI NAGA	VE	NKATA SANTOSHI NITYA	BANDA	ARU			166	-73-5	572
Home address (255 W 31S	`	iber and street). If you have a P.O. bo> ד	, see inst	ructions.			-		Apt. no.
City, town, or po	ost o	office. If you have a foreign address, al	so comple	ete spaces below.		State		ZIP co	de
CHICAGO						IL		6061	. 6
Foreign country	nar	ne	Foreign	province/state/county		Foreigr	n postal co	ode	
Filing Status Check only one box.	-	you checked the QSS box, enter the	Single Arried filing separately (MFS) Qualifying surviving spouse (QSS) Estate rou checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:						
Digital Assets	At oth	any time during 2023, did you: (a) rece erwise dispose of a digital asset (or a	ive (as a r financial ii	eward, award, or paymenterest in a digital asset)	ent for property or)? (See instruction:	services); s.)	or (b) sell	exchan	nge, or Yes 🔀 No
Dependents						(4) 🤇	heck the be		fies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to	vou Ci	nild tax cre	dit C	Credit for other dependents
						<u>,</u>			
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	k 1 (see in	structions)			. 1a	1	12,020.
Effectively	b	Household employee wages not rep)	
Connected	С	Tip income not reported on line 1a (
With U.S.	d	Medicaid waiver payments not repo					. 10		
Trade or	e f	Taxable dependent care benefits fro Employer-provided adoption benefi				· · ·	· 10		
Business	f	Wages from Form 8919, line 6					· 1		
Attach	9 h	Other earned income (see instructio							
Form(s) W-2, 1042-S,	i	Reserved for future use						•	
SSA-1042-S,	i	Reserved for future use					. 1	i	
RRB-1042-S, and 8288-A here. Also	k		m Schedu	ıle OI (Form 1040-NR), it	tem L,				
attach	z	Add lines 1a through 1h					. 12	z	12,020.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	b Tax	able interest		. 2ł)	
tax was	3a	Qualified dividends 3	а 📃	b Ord	linary dividends .		. 3ł	>	
withheld.	4a	IRA distributions 44			able amount				
If you did not get a Form	5a	Pensions and annuities 5			able amount				
W-2, see	6	Reserved for future use							
instructions.	7 8	Capital gain or (loss). Attach Schedu Additional income from Schedule 1	•	, ,	•				
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and							12,020.
	10	Adjustments to income from Sched		-					
	10	-	•	· · · · · · · · · ·	•	-)	
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income			. 1'	I	12,020.
	12	Itemized deductions (from Scheduction (see instructions) .						2	13,850.
	13a	Qualified business income deductio							
	b	Exemptions for estates and trusts o							
	с	Add lines 13a and 13b					. 13	c	
	14							1	13,850.
	15	Subtract line 14 from line 11. If zero			kable income		. 1	-	0.

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

orm 1040-NR (2023)							Page 2
Tax and	16	Tax (see instructions). Check if an	y from Form(s): 1] 8814 2 🗌 497	72 3		16	0.
redits	17	Amount from Schedule 2 (Form 1	1040), line 3				17	0.
	18	Add lines 16 and 17					18	0.
	19	Child tax credit or credit for othe	r dependents from Scl	nedule 8812 (Form 10)40)		19	
	20	Amount from Schedule 3 (Form 1	1040), line 8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If z					22	0.
	23a	Tax on income not effectively cor						
		Schedule NEC (Form 1040-NR), I			23a			
	b	Other taxes, including self-emplo						
		line 21			23b			
	с	Transportation tax (see instruction	ons)		23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is you					24	0.
ayments	25	Federal income tax withheld fron						
aymonto	а	Form(s) W-2			25a	1,136		
	b	Form(s) 1099			25b		-	
	c	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	1,136.
	e	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S					25g	
	9 26	2023 estimated tax payments an					26	
	20 27	Reserved for future use	••		27		20	
	28	Additional child tax credit from S					_	
			,	,	28		-	
	29 20	Credit for amount paid with Form					_	
	30	Reserved for future use			30		-	
	31	Amount from Schedule 3 (Form 1	,.		31			
	32	Add lines 28, 29, and 31. These a					32	1 1 2 C
	33	Add lines 25d, 25e, 25f, 25g, 26,	· · · · · · · · · · · · · · · · · · ·				33	1,136.
efund	34	If line 33 is more than line 24, sul			•		34	1,136.
	35a	Amount of line 34 you want refu					35a	1,136.
rect deposit? e instructions.	b	Routing number 0 5 2 0				Savings		
	d	Account number 4 4 6 0						
	е	If you want your refund check m						
		enter it here.						
	36	Amount of line 34 you want appl			36			
mount	37	Subtract line 33 from line 24. This	•					
ou Owe	00	For details on how to pay, go to	0,		1 1		37	
	38	Estimated tax penalty (see instru	,		38			
hird	-	u want to allow another person to					plete be	low. 🛛 No
arty	Desig			one		nal ident	ification	
esignee	name					er (PIN)		
		penalties of perjury, I declare that I hav they are true, correct, and complete. D						
ign				Vour occupation			• •	ent you an Identity
-	rour	signature	Date	Your occupation	1			PIN, enter it here
ere				SOFTWARE (A TESTER		e inst.)	
	Phone	e no.	Email addre	-		(34	- /	
- 1 - 1		rer's name	Preparer's signature		Date	PTIN		Check if:
aid	•	I PRIYA RAM SAGAR GUPTA	SYAM PRIYA RAI	M SAGAR GIIPTA		P0208	32703	Self-employed
reparer		name GLOBAL TAXES I			1 0 1/ 1 / 2021	Phone		78)965-9522
-		L GUVDAT TAVES T	JTC			1 . HOHE		101900-9022
lse Only			T E BRUNSWICK	NT 0001C		Firm's		84-3171965

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2023
Attachment Sequence No. 7B

Your identifying number

166-73-5572

SAI NAGA VENKATA SANTOSHI NITYA BANDARU

Enter a	amount of income unde	er the appropriate rate of tax. See instructions.						
		Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
				(a) 1070	(b) 1370	(c) 30 %	%	%
1	Dividends and divide	nd equivalents:						
а	Dividends paid by U.	S. corporations	1a					
b		eign corporations						
С	Dividend equivalent p	ayments received with respect to section 871(m) transactions	3 1c					
2	Interest:							
а	Mortgage		2a					
b	Paid by foreign corpo	prations	2b					
С	Other		2c					
3	Industrial royalties (p	atents, trademarks, etc.)	3					
4	Motion picture or TV	copyright royalties	4					
5	Other royalties (copy	rights, recording, publishing, etc.)	5					
6	Real property income	and natural resources royalties	6					
7	Pensions and annuiti	es	7					
8	Social security benef	ts	8					
9		18 below	9					
10	If zero or less, enter							
а	Winnings							
b			10c					
11	Note: Enter winnings	s of countries other than Canada. only. Losses aren't allowed						
12	Other (specify):		-					
			12					
13	Add lines 1a through	12 in columns (a) through (d)						
14	Multiply line 13 by ra	ate of tax at top of each column	14					
15	Tax on income not ef	fectively connected with a U.S. trade or business. Add colu					-NR, line 23a 15	
		Capital Gains and Losses	From	Sales or Excha	anges of Proper	y		
Enter only the capital gains and osses 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 at mm/dd/		(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							
	on disposing of a U.S. real y interest; report these							
gains ai	nd losses on Schedule D							
Form 1	040). property sales or						<u> </u>	
exchan	ges that are effectively						<u> </u>	
	ted with a U.S. business edule D (Form 1040),							
	797, or both.	18 Capital gain. Combine columns (f) and (g) of line	17. Ent	er the net gain her	e and on line 9 abo	ove. If a loss, ente	er-0 18	

SCHE	DUL	E	OI
(Form	1040	-N	R)

Other Information

OMB No. 1545-0074

20**23**

Attach to Form 1040-NR.

	nent of the Treasury	Go t	o www.irs.gov/Form1040N			Attachment		
	Revenue Service		Ans	wer all questions.			Sequence N	o. /C
	hown on Form 1040					Your identifyir	•	
			HI NITYA BANDARU			166-73-		
Α	Of what country	/ or countries v	vere you a citizen or nation	al during the tax year?	INDIA			
В	In what country	did you claim	residence for tax purpose	s during the tax year?	India			
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?							⊠ No
D	Were you ever:							
	A U.S. citizen?							🛛 No
2.	-		rmanent resident) of the Ur				Yes	🛛 No
_	-		?), see Pub. 519, chapter 4,	-				
Е			day of the tax year, enter					
_			day of the tax yearF1					
F			visa type (nonimmigrant sta					🛛 No
•	-		e the date and nature of th					
G	•		left the United States durin Canada or Mexico AND con	•		at intervale		
			r Mexico and skip to item I			Mexico		
	Date entered mm/c		Date departed United Stat mm/dd/yy	es Da	te entered United States mm/dd/yy	Date de	parted Unite mm/dd/yy	d States
		, , , , ,						
н	Give number of	davs (including	vacation, nonworkdays, and	 d partial days) you were	present in the United S	tates durina:		
••			, 2022					
I	Did you file a U	S income tax	return for any prior year? .	,, und 201	20	•••••	Yes	🛛 No
-			nd form number you filed:					
J	Are vou filing a	return for a tru	st?				Yes	🛛 No
			U.S. or foreign owner unde					
			ribution from a U.S. persor					🗌 No
κ	Did you receive	total compens	ation of \$250,000 or more	during the tax year? .			🗌 Yes	🛛 No
	If "Yes," did you	u use an alterna	ative method to determine	the source of this com	pensation?		🗌 Yes	🗌 No
L			f you are claiming exempt			ax treaty wi	th a foreigr	o country
	complete (1) the	rough (3) below	. See Pub. 901 for more in	formation on tax treati	es.			
1.			the applicable tax treaty an			claimed the t	treaty benefi	it, and the
	amount of exem	•	e columns below. Attach F					
		(a) Cou	intry	(b) Tax treaty article			mount of ex	
					claimed in prior tax yea	rs income	e in current t	ax year
	(e) Total. Enter	r this amount o	n Form 1040-NR, line 1k. E	Do not enter it anywher	re else on line 1			

2.	Were you subject to tax in a foreign country on any of the income shown in 1(d) above?	٩ı
3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?	٩ı
	If "Yes," attach a copy of the Competent Authority determination letter to your return.	
Μ	Check the applicable box if:	

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

BAA

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

REV 03/07/24 PRO Schedule OI (Form 1040-NR) 2023