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

	5.00.100 05.1100								
Submis	sion Identification Number (SID)								
Taxpayer'	's name	Social securi	y numb	er					
KRIS	HNA PRASAD VAJIR	112-63	112-63-4918						
Spouse's			Spouse's social security number						
Doubl	Too Data we lefower time. Too Very Ending December 04.	·			. \				
Part I		nter year you a	re aut	norizing	J.)				
	hole dollars only on lines 1 through 5.								
	form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1	1	2,376.				
	Total tax		2	Д.	0.				
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3						
	Amount you want refunded to you		4		1,234.				
	Amount you want refunded to you		5		1,234.				
Part I		nd keep a cop		our ret	urn)				
my knov return (o to send	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amer wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, tramy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the service of the content of the	above are the amount ansmitter, or electron rejection of the tr	ounts fi onic ret ansmis	rom the in urn origin ssion, (b)	ncome tax ator (ERO) the reason				
Agent to payment authorizate payment business taxes to personal	telay in processing the return of return, and (c) the date of any returnd. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of the original taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term to the the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation is days prior to the payment (settlement) date. I also authorize the financial institutions involved in receive confidential information necessary to answer inquiries and resolve issues related to the identification number (PIN) below is my signature for the income tax return (original or amended to Funds Withdrawal Consent.	t indicated in the ta titution to debit the ninate the authoriza requests must be nothe processing of the payment. I fund	entry to the control of the control	paration so to this according revoke yed no la pectronic p knowledg	oftware for count. This (cancel) a ter than 2 payment of le that the				
Taxpav	rer's PIN: check one box only]				
\boxtimes	l authorize GLOBAL TAXES LLC to enter or gener	rate my PIN	4 9	9 1 8	as my				
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ž En		digits, but r 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 and your return is filed using the Practitioner PIN r below.								
Your sig	gnature ► Date								
Snouse	e's PIN: check one box only				_				
	I authorize to enter or gener	rata my DINI			as my				
	ERO firm name	,	ter five	digits, but] as my				
	signature on the income tax return (original or amended) I am now authorizing.			r 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 and your return is filed using the Practitioner PIN r below.								
Spouse	's signature ▶ Date	•							
	Practitioner PIN Method Returns Only—continue be	low							
Part II	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 Don't ent	6 6		8 9				
		_ 5 5 5116							
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual incored to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	submitting this retu	ırn in a	ccordanc					
ERO's s	signature ► Date	>							
	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 Jan	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	:	2023,	ending	,	20		instructions.	
Your first name	and r	niddle initial	Last na	ame				Your id	lentify	ing number	
KRISHNA PRASAD		VAJIR					112	112-63-4918			
Home address (number and street). If you have a P.O. box										Apt. no.	
13610 ACO	RN	HUNT PL									
City, town, or post office. If you have a foreign address, also				lete spaces belov	/.		State		ZIP code		
HERNDON							VA		20171		
Foreign country	name	9	Foreigr	n province/state/c	ounty		Foreign	oostal co	de		
Filing Status		Single		•	-	ng surviving spouse (,		state	☐ Trust	
Check only one box.											
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f						r (b) sell, 		ange, or Yes X No	
Dependents							(4) Ch	eck the bo	x if qua	alifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to yo	u Chil	d tax cred	lit	Credit for other dependents	
		(i) The hame Last hame		,		(b) Holationomp to yo					
If more than four								H			
dependents, see instructions and								Ħ			
check here											
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)				. 1a	П	12,376.	
Effectively	b	• • • • • • • • • • • • • • • • • • • •	•	,				. 1b		,	
Connected											
With U.S. d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								. 1d	1		
Trade or	e Taxable dependent care benefits from Form 2441, line 26								,		
Business	f Employer-provided adoption benefits from Form 8839, line 29							. 1f			
240000	g	g Wages from Form 8919, line 6									
Attach	h										
Form(s) W-2, 1042-S,	i	i Reserved for future use									
SSA-1042-S, j Reserved for future use						. 1j					
						tem L,					
attach	z	Add lines 1a through 1h						. 1z		12,376.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	- 1		b Tax	able interest		. 2b			
tax was	3a	Qualified dividends 3a	1		b Orc	linary dividends		. 3b	,		
withheld.	4a	IRA distributions 4a				able amount		. 4b			
If you did not	5a	Pensions and annuities 5a			b Tax	able amount		. 5b			
get a Form	6	Reserved for future use									
W-2, see instructions.	7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here									
	8	Additional income from Schedule 1 (Form 1040), line 10									
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income								12,376.	
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income								,		
	11	Subtract line 10 from line 9. This is y	. 11		12,376.						
	12	2 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)								13,850.	
•	13a										
	b	Exemptions for estates and trusts or	nly (see i	nstructions) .		13b					
	С										
	14	Add lines 12 and 13c					. 14		13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is y	our ta :	cable income		. 15		0.	

Form 1040-NR (2	2023)										Page 2	
Tax and	16	Tax (see instructions). Check if any t	rom For	rm(s): 1	314 2 [4972	2 ;	3 🗌		16	0.	
Credits	17	Amount from Schedule 2 (Form 10-	40), line	3						17	0.	
	18	Add lines 16 and 17	18	0.								
	19	Child tax credit or credit for other of	19									
	20	Amount from Schedule 3 (Form 10-	20									
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If zero	or less	s, enter -0						22	0.	
	23a	Tax on income not effectively conn Schedule NEC (Form 1040-NR), line		vith a U.S. trade			23a					
	b	Other taxes, including self-employed line 21			•	, , , , , , , , , , , , , , , , , , ,	23b					
	С	Transportation tax (see instructions				ı	23c					
	d	Add lines 23a through 23c								23d		
	24	Add lines 22 and 23d. This is your	total ta	x						24	0.	
Payments	25	Federal income tax withheld from:										
,	а	Form(s) W-2				.	25a		1,234			
	b	Form(s) 1099					25b					
	С	Other forms (see instructions) .				.	25c					
	d	Add lines 25a through 25c								25d	1,234.	
	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 20	22 return .					26		
	27	Reserved for future use				- 1	27					
	28	Additional child tax credit from Sch	nedule 8	8812 (Form 1040)	.	28					
	29	Credit for amount paid with Form 1				1	29					
	30	Reserved for future use				t	30					
	31	Amount from Schedule 3 (Form 10-				1	31					
	32	Add lines 28, 29, and 31. These are	your t e	otal other paym	ents and re	funda	ble cı	edits .		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, ar								33	1,234.	
Refund	34	If line 33 is more than line 24, subti								34	1,234.	
	35a	Amount of line 34 you want refund					-	=		35a	1,234.	
Direct deposit?	b	Routing number 0 1 1 9			c Type:	_	Checl		Savings			
See instructions.	d	Account number 3 8 5 0			8 2				· ·			
	е	If you want your refund check mail	ed to a	n address outsic	le the United	d State	s not	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 i				'		•				
You Owe		For details on how to pay, go to wi	ww.irs.g	ov/Payments or	see instruct	ions .				37		
	38	Estimated tax penalty (see instruct	ions) .			.	38					
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.									olete be	low. 🗵 No	
Party Designee	Designee's name			Phone Pers					nal identi er (PIN)	fication		
	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 pre											
Sign	Your	signature	Date Your occupation					If th	ne IRS s	ent you an Identity		
Here					CIVIL ENGINEER				Pro		PIN, enter it here	
İ	Phon	e no.		Email address	1				1,			
Doid			reparer	's signature			Date		PTIN		Check if:	
Paid	VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI P0247						0833	Self-employed				
Preparer	Firm's name CIODAL TAVES IIC							78)965-9522				
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's El											

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

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

KRISHNA PRASAD VAJIR 112-63-4918 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 3 4 Motion picture or TV copyright royalties 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 (f) LOSS 16 (a) Kind of property and description (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 subtract (d) from (e). descriptive details not shown below) 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 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 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

2023

Attachment Sequence No. 7C

vame	snown on Form 1040-NR			Your identifying	number							
KRI	SHNA PRASAD VAJIR			112-63-4	918							
Α	Of what country or countries were you a citizen or nation											
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	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?										
D	Were you ever:		,									
	. A U.S. citizen?				Yes	⊠ No						
	 A green card holder (lawful permanent resident) of the L 					⊠ No						
_					_ 103	<u> </u>						
E	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.											
_	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 visa type (nonimmigrant status) or U.S. immigration status?											
G	List all dates you entered and left the United States during 2023. See instructions.											
	Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,											
	check the box for Canada or Mexico and skip to item H											
	Date entered United States	ites	Date entered United State	s Date depa	arted Unite	ed States						
	mm/dd/yy mm/dd/yy		mm/dd/yy		mm/dd/yy							
н	Give number of days (including vacation, nonworkdays, ar	id partial davs) vou v	were present in the United :	States during:								
	2021, 2022											
ı	Did you file a U.S. income tax return for any prior year?				X Yes	□No						
	If "Yes," give the latest year and form number you filed:											
J	Are you filing a return for a trust?	 			☐ Yes	⊠ No						
	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a											
	U.S. person, or receive a contribution from a U.S. person?											
K	Did you receive total compensation of \$250,000 or more	e during the tax year	r?		Yes	⊠ No						
	If "Yes," did you use an alternative method to determine				Yes	□ No						
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign											
	complete (1) through (3) below. See Pub. 901 for more information on tax treaties.											
1	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the											
	amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.											
	(a) Country	(b) Tax treaty arti	cle (c) Number of month claimed in prior tax ye	` ` `								
			ciainied in prior tax ye	ars income	THE CUITE II	———						
	(e) Total. Enter this amount on Form 1040-NR, line 1k.	Do not enter it anyo	where else on line 1									
2	. Were you subject to tax in a foreign country on any of the	-			Yes	□ No						
_	 Were you subject to tax in a foreign country of any of it. Are you claiming treaty benefits pursuant to a Competer 				☐ Yes	□ No ⊠ No						
3		-			∟ res	∠ NO						
R.A	If "Yes," attach a copy of the Competent Authority deter	mination letter to yo	Jui Tetulli.									
M 1	Check the applicable box if: This is the first year you are making an election to treat.	ncomo from roal ==	oporty located in the Unite	nd States as at	footively	onnocto-						
1	 This is the first year you are making an election to treat with a U.S. trade or business under section 871(d). See 		operty located in the Unite		rectively C	Johnected						
^	You have made an election in a previous year that ha				ootod in t	ho Haitad						
2	States as effectively connected with a U.S. trade or bus			ai property 10								