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.

Submission Identification Number (SID)

Taxpaye	er's name		Socia	al secu	irity numb	ber
SRI	LEKHA CHELLAPALLI		48	34-7	1-618	3
Spouse	's name		Spou	ise's s	ocial secu	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (E	inter y	/ear	r you	are au	thorizing.)
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	16,380.
2	Total tax				2	254.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	1,731.
4	Amount you want refunded to you				4	1,477.
5	Amount you owe				5	

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					FBO firm name	с ;	Ē
	X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

1	6	1	8	3	as mv
Ent don	asiny				

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 signature 🕨	Date 🕨			
Practitioner PIN Method Returns Only—continue below				
Part III Certification and Authentication – Prac	titioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9			

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 🕨		
	D Must Retain This Form — See Instru it This Form to the IRS Unless Reque			
For Denergy ork Deduction Act Nation and you			Earm 8879 (Bay, 01.2	001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/05/24 PRO

1040	-N	IR Department of the Treasury-Intern U.S. Nonresident Ali	nal Rever en In	nue Service COME Tax R	eturn	2023	OMB No.	1545-0074		Only—Do not write le in this space.	
For the year Jan	. 1–D	Dec. 31, 2023, or other tax year beginn	ing	,	2023, ei	nding		, 20	See separate		
Your first name and middle initial			Last name Yo					Your i	instructions. our identifying number ee instructions)		
SRILEKHA			CHEL	LAPALLI				484	-71-6	183	
Home address (num	per and street). If you have a P.O. box	, see ins	structions.						Apt. no.	
13550 RAN											
	ost of	ffice. If you have a foreign address, als	so comp	lete spaces below	<i>'</i> .		State		ZIP cod		
HERNDON		-	Faustau				VA		2017	1	
Foreign country	nam	e	Foreigi	n province/state/c	ounty		Foreigr	n postal co	bae		
Filing Status Check only one box.	lf :	Single Married filing separation of the Separation Separation of the Separation Separati	hild's na	ame if the qualifyir	ng perso		ot your de		-	Trust	
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f									
Dependents					_ Τ		(4)	Check the bo		es for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to	vou C	hild tax cre	ו דור	redit for other dependents	
							-				
If more than four dependents, see											
instructions and											
check here	-										
Income	1a	Total amount from Form(s) W-2, box	•	,						18,880.	
Effectively	b	Household employee wages not rep									
Connected	C d	Tip income not reported on line 1a (s Medicaid waiver payments not report									
With U.S. Trade or	d e	Taxable dependent care benefits fro						. 10			
Business	f	Employer-provided adoption benefit						. 1			
Duomooo	g	Wages from Form 8919, line 6						. 10	,		
Attach Form(s) W-2,	h	Other earned income (see instruction	ıs) .			<u>.</u> .					
1042-S,	i	Reserved for future use				. 1i					
SSA-1042-S, RRB-1042-S,	j	Reserved for future use						. 1			
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		·	,						
attach Form(s)	z	Add lines 1a through 1h	1	· · · · ·						18,880.	
1099-R if	2a	Tax-exempt interest 2a				ble interest					
tax was withheld.	3a 4a	Qualified dividends 3a	-			hary dividends . ble amount					
If you did not	4a 5a	IRA distributions4aPensions and annuities5a				ble amount					
get a Form	5a 6	Reserved for future use	_								
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu									
instructions.	8	Additional income from Schedule 1 (Form 10	040), line 10 .				. 8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income								18,880.	
	10	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income								2,500.	
	11	Subtract line 10 from line 9. This is y	our adjı	usted gross incor	ne .			. 1'		16,380.	
	12	Itemized deductions (from Schedu deduction (see instructions)							2	13,850.	
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	с	Add lines 13a and 13b						. 13	c		
	14									13,850.	
	15	Subtract line 14 from line 11. If zero						. 1		2,530.	
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate inst	ructions.				Form 10	040-NR (2023)	

Form 1040-NR (2	2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 28814 2 4	1972 3		16	254.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			. 17	0.
	18	Add lines 16 and 17			. 18	254.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form	1040) .		. 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	254.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15				
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040) line 21				
	с	Transportation tax (see instructions)				
	d	Add lines 23a through 23c . <th>· · ·</th> <th></th> <th>. 23d</th> <th></th>	· · ·		. 23d	
	24	Add lines 25a through 250				254.
Deumente		Federal income tax withheld from:	<u> </u>	· · · ·	. 24	204.
Payments	25		250	1 7 2	1	
	a	Form(s) W-2	25a 25b	1,73	<u> </u>	
	b	Form(s) 1099				
	C	Other forms (see instructions)			05-1	1 7 2 1
	d	Add lines 25a through 25c				1,731.
	e	Form(s) 8805				
	f	Form(s) 8288-A				
	g	Form(s) 1042-S				
	26	2023 estimated tax payments and amount applied from 2022 return			. 26	
	27	Reserved for future use				
	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 refur				1 501
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments				1,731.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amo	•			1,477.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, ch				1,477.
Direct deposit? See instructions.	b	Routing number 0 4 1 0 0 1 2 4 c Type:	K Checki	ng 🔄 Savin	gs	
	d	Account number 4 1 8 8 4 6 4 5 2 5				
	е	If you want your refund check mailed to an address outside the United Stenter 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 instructions	s		· 37	
	38	Estimated tax penalty (see instructions)	38			
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See ins	tructions.	🗌 Yes. Co	mplete be	low. 🛛 No
Party Designee	Desig name			Personal ide number (PIN		
		penalties of perjury, I declare that I have examined this return and accompanying sch they are true, correct, and complete. Declaration of preparer (other than taxpayer) is b				
Sign	Your	signature Date Your occupati	ion		f the IRS s	ent you an Identity
Here						PIN, enter it here
-		STUDENT	(MS)	((see inst.)	
	Phone					
Paid	•	arer's name Preparer's signature	Date	PTIN		Check if:
Preparer	VENKA	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALI	LI		470833	Self-employed
Use Only		s name GLOBAL TAXES LLC				78)965-9522
		address 245 ROONEY CT E BRUNSWICK NJ 08816		Firm		8-2145487
Go to www.irs.g	gov/Foi	rm1040NR for instructions and the latest information.	A REV C	02/05/24 PRO	F	orm 1040-NR (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01	
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security number	
SRILEKHA CHELLAPALLI 484-71-6				
	••			

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	_	
	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
		8m	_	
n	Section 951(a) inclusion (see instructions)	8n	_	
0	Section 951A(a) inclusion (see instructions)	80	_	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2	8q 8r	-	
r	Nontaxable amount of Medicaid waiver payments included on Form	or	-	
S	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
Ľ	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:		-	
2		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente		-	
	1040, 1040-SR, or 1040-NR, line 8		10	
For Pa	nerwork Beduction Act Notice, see your tax return instructions			1 (Form 1040) 2023

F lotice, see your tax ape retur nstructions

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	sis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	2,500.
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	a		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	d		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	g	_	
h	Attorney fees and court costs for actions involving certain unlawful	_		
	discrimination claims (see instructions)	h	-	
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations		-	
Ţ	Housing deduction from Form 2555	J	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	ĸ	-	
Z	Other adjustments. List type and amount:	_		
05	Zatal ath an a divisities and a link in a 24 division 24 division 24		05	
25 06	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . En Form 1040, 1040-SR, or 1040-NR, line 10		0	
			26	2,500.
	BAA RE	EV 02/05/24 PRO	Schedule	1 (Form 1040) 2023

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

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Attachment Sequence No. 7B Your identifying number

2

SRILEKHA CHELLAPALLI

484-71-6183

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)				
						(a) 10%	(d) 15%	(C) 30%	%	%
1	Dividends and divide	end e	equivalents:							
а	Dividends paid by U.	J.S. corporations			1a					
b	Dividends paid by fo	reign	corporations		1b					
с	Dividend equivalent p	bayme	ents received with respect to sectior	n 871(m) transactions	1c					
2	Interest:	•								
а	Mortgage				2a					
b			ons		2b					
с					2c					
3			ts, trademarks, etc.)		3					
4	• •		yright royalties		4					
5	1,5,5,				5					
6	Real property income and natural resources royalties									
7	Pensions and annuities				7					
8					8					
9	•	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	Gambling—Resident Note: Enter winnings	ts of s only	countries other than Canada. y. Losses aren't allowed		11					
12	Other (specify):									
					12					
13			n columns (a) through (d)		13					
14	Multiply line 13 by r	rate o	of tax at top of each column		14					
15	Tax on income not ef	ffecti	ively connected with a U.S. trade o						NR, line 23a 15	
			Capital Ga	ains and Losses	From	Sales or Excha	nges 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 acc		(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).
	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 1	•									
	property sales or ges that are effectively									
exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17	Add columns (f) and (g) of line 1	16				17		
		18	Capital gain. Combine column	s (f) and (g) of line 17	7. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, enter	r-0 18	
									·	•

SCHE	DULE	ΟΙ
(Form	1040-N	R)

Other Information

OMB No. 1545-0074

(,	0.1		to Form 1040-NR.			202	23		
	ent of the Treasury Revenue Service	GOI	o www.irs.gov/Form1040NF Answ	r for instructions an ver all questions.	d the latest information		Attachment Sequence No	70		
Name shown on Form 1040-NR					Your identifyin					
SRILEKHA CHELLAPALLI						484-71-6	-			
Α			vere you a citizen or nationa	I during the tax year	r? 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?						Yes	🗙 No		
2.	A green card h	older (lawful pe	rmanent resident) of the Uni	ted States?			Yes	🛛 No		
	-	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.								
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 day of the tax yearF1									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?							🗙 No		
G	List all dates yo	ou entered and	left the United States during	2023. See instructi	ions.					
	Note: If you're	a resident of C	Canada or Mexico AND com r Mexico and skip to item H	mute to work in the	e United States at frequ	ient intervals,				
		United States	Date departed United State mm/dd/yy		Date entered United State mm/dd/yy		oarted United mm/dd/yy	d States		
		ud/yy	min/dd/yy		nini, dd/yy		min/dd/yy			
н			vacation, nonworkdays, and							
	2021		, 2022	, and 2	023 365	··	∇ v			
I	If "Yes," give th	ne latest year ar	return for any prior year? . nd form number you filed:	10	40NR		X Yes	∐ No		
J			st?........... U.S. or foreign owner under				Ves	🗙 No		
	U.S. person, or	receive a cont	ribution from a U.S. person?	· · · · · · ·			Yes	🗌 No		
Κ	Did you receive	total compens	sation of \$250,000 or more c	luring the tax year?			Yes	🗙 No		
	If "Yes," did yo	u use an altern	ative method to determine th	ne source of this co	mpensation?		🗌 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 country 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) Cou	Intry	(b) Tax treaty article	(c) Number of months (d) Amount of exem income in current tax					
								ix you		
0			n Form 1040-NR, line 1k. Do preign country on any of the	-			☐ Yes	No		
			ts pursuant to a Competent				∐ Yes			

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

2. You have made an election in a previous year that has not been revoked, 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 02/05/24 PRO Schedule OI (Form 1040-NR) 2023