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

Subm	ission Identification Number (SID)					
Taxpay	er's name	Social securit	Social security number			
PAA	VANI JANAPAREDDY	726-51-0505				
Spouse	's name	Spouse's soc	cial security number			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	⊥ r year you a	re aut	horizing	.)	
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	8	3,592.	
2	Total tax		2		0.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		385.	
4	Amount you want refunded to you		4		385.	
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	ırn)	
return to send for any Agent payme authori payme busine taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abore (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmiding return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate nt, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation reges days prior to the payment (settlement) date. I also authorize the financial institutions involved in the correceive confidential information necessary to answer inquiries and resolve issues related to the particular of the payment (PIN) below is my signature for the income tax return (original or amended) I amic Funds Withdrawal Consent.	itter, or electro- ection of the tr I.S. Treasury are icated in the ta- on to debit the e the authoriza- uests must be processing of payment. I furt	enic ret ansmis nd its c ax prep entry t ation. T receiv the ele her ac	urn origina sion, (b) to lesignated aration so this accorded to revoke yed no late throwledge throwledge.	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the	
	ayer's PIN: check one box only					
×	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	Ent		digits, but r all zeros	as my	
	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 r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.					
Yours	signature ▶ Date ▶					
Spous	se's PIN: check one box only	_				
Г	I authorize to enter or generate	my PIN			as my	
	ERO firm name			digits, but	,	
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't ente	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spous	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
Part	III Certification and Authentication — Practitioner PIN Method Only					
ERO's	S EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ente	6 6 erallze		3 9	
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in a	ccordance		
ERO's	s signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					

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. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending					ending	,	20	See separate instructions.		
Your first name and middle initial			Last name Y					Your identifying number (see instructions)		
PAAVANI			T 7 1 1 7		`	726-51-0505				
Home address (number and street). If you have a P.O. box,				PAREDDY			/20-	Apt. no.		
5215 CLIN	`	, •	, 300 1113	tructions.				E E		
		ற்ற ffice. If you have a foreign address, als	o comp	lete enaces helow		State		ZIP code		
• • •	051 0	nice. If you have a foreign address, als	so comp	iete spaces below.		OH		44240		
KENT Foreign country	nam	<u> </u>	Foreign	n province/state/county			oostal cod			
r oreigir courti y	Hairi	C	l oreigi	r province/state/county		rorcigir	Jostai Cot	uc		
Filing Status	×		tate							
Check only one box.	If	endent:								
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f						exchange, or .		
Dependents						(4) Ch	eck the box	if qualifies for (see inst.):		
(see instructions):		(4) First name	(2) Dependent's		(2) Deletienship to ve	Chil	d tax credi	Credit for other		
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents		
If more than four								+ +		
dependents, see							$\overline{\Box}$			
instructions and check here										
	10	Total amount from Form(s) W-2, box	1 (000 i	notructions)			10	8,592.		
Income	1a b	Household employee wages not rep	•	•				0,372.		
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			
Dusilless	g	Wages from Form 8919, line 6	. 1g							
Attach	h	Other earned income (see instruction	. 19							
Form(s) W-2, 1042-S,	i	Reserved for future use	,							
SSA-1042-S,	i	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)	n Sched	ule OI (Form 1040-NR), i	tem L,					
attach	z	Add lines 1a through 1h					. 1z	8,592.		
Form(s)	2a	Tax-exempt interest 2a	1		able interest		. 2b			
1099-R if tax was	За	Qualified dividends 3a	1	b Ord	linary dividends .		. 3b			
withheld.										
If you did not	5a	Pensions and annuities 5a		b Tax	able amount		. 5b			
get a Form	6	Reserved for future use	. 6							
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If no	ot required, check he	ere [7			
	8	Additional income from Schedule 1 (. 8							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively c	onnected income		. 9	8,592.		
	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	our adj u	sted gross income			. 11	8,592.		
	12	Itemized deductions (from Schedu deduction (see instructions)		13,850.						
	13a	Qualified business income deduction	n from Form 8995 or Form 8995-A . 13a							
	b	Exemptions for estates and trusts or	nly (see i	nstructions)	13b					
	С	Add lines 13a and 13b					. 13c			
	14	Add lines 12 and 13c					. 14	13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta :	xable income .		. 15	0.		

Form 1040-NR (2	2023)									Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1	38	314 2 [4972	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 S	Schedi	ule 8812 (Fo	orm 104	10) .			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. t Schedule NEC (Form 1040-NR), line 15				23a				
	b	Other taxes, including self-employment tax, from Scline 21	hedule	e 2 (Form 1	040),	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		385		
	b	Form(s) 1099			.	25b				
	С	Other forms (see instructions)			.	25c				
	d	Add lines 25a through 25c			-				25d	385.
	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 fro	om 20	22 return .					26	
	27	Reserved for future use			- 1	27				
	28	Additional child tax credit from Schedule 8812 (Form			l l	28				
	29	Credit for amount paid with Form 1040-C				29				
	30	Reserved for future use			l l	30				
	31	Amount from Schedule 3 (Form 1040), line 15				31				
	32	Add lines 28, 29, and 31. These are your total other				ole cr	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are y							33	385.
Refund	34	If line 33 is more than line 24, subtract line 24 from line							34	385.
riciana	35a	Amount of line 34 you want refunded to you . If Form				-	=		35a	385.
Direct deposit?	b	Routing number 0 4 4 0 0 0 0 3 7		c Type:	_	Check	_	Savings		
See instructions.	d	• • • • • • • • • • • • • • • • • • • •	5				 	ourgo		
	e	If you want your refund check mailed to an address		le the I Inite	d State	s not	i——i shown or	nage 1		
	Ŭ	enter it here.						. •		
	36	Amount of line 34 you want applied to your 2024 es				36				
Amount	37	Subtract line 33 from line 24. This is the amount you								
You Owe	•-	For details on how to pay, go to www.irs.gov/Paymer			tions .				37	
rou owe	38	Estimated tax penalty (see instructions)			1	38	1		0.	
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								nlete be	elow. 🗵 No
Party	·							•		
Designee	Designee's Phone Personal identiname no. number (PIN)						ilication			
	Under	penalties of perjury, I declare that I have examined this return they are true, correct, and complete. Declaration of preparer (
Sign	Your signature Date Your occupation If the					he IRS s	sent you an Identity			
Here					Pro	otection	PIN, enter it here			
				SOF"TWA	KE El	NGII	NEEK	(se	e inst.)	
	Phon				- 1	Det:		DTIN		Ob a day
Paid		arer's name Preparer's signature				Date		PTIN		Check if:
Preparer	VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI P0247							Self-employed		
Use Only		s name GLOBAL TAXES LLC								78)965-9522
· · · · · ·	Firm's	s address 245 ROONEY CT E BRUNSWIC	K N	T 08816				Firm's	EIN 8	38-2145487

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 PAAVANI JANAPAREDDY 726-51-0505 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
					(b) 15%	(C) 30%	%	%	
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by fo	reign corporations		1b					
С	Dividend equivalent p	ayments received with respect to section 871(m) trans	sactions	1c					
2	Interest:		ĺ						
а	Mortgage			2a					
b	Paid by foreign corpo	orations	[2b					
С									
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	e and natural resources royalties	[6					
7	Pensions and annuit	es	[7					
8	Social security benef	its	[8					
9	Capital gain from line	e 18 below	[9					
10		s of Canada only. Enter net income in column (c).	İ						
а	Winnings								
b	Losses	<u> </u>		10c					
11	Note: Enter winnings	s of countries other than Canada. only. Losses aren't allowed		11					
12	Other (specify):								
				12					
13	•	12 in columns (a) through (d)	+	13					
14		ate of tax at top of each column		14					
15	Tax on income not e	fectively connected with a U.S. trade or business.						NR, line 23a 15	
		Capital Gains and L	.osses F	rom	Sales or Excha	nges of Propert	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain		(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).
or loss	on disposing of a U.S. real								
property interest; report these gains and losses on Schedule D									
(Form 1	•								
exchan	property sales or ges that are effectively								
	ted with a U.S. business edule D (Form 1040),	17 Add columns (f) and (g) of line 16					17		
Form 4797, or both.		18 Capital gain. Combine columns (f) and (g)	of line 17.	. Ente	r the net gain here	e and on line 9 abo	ove. If a loss, enter	r -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

Name sl	nown on Form 1040-NR				Your identifying	number					
PAAV	ANI JANAPAREDDY				726-51-05	05					
Α	Of what country or countries were you a citizen or national during the tax year? 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 p	ermanent resider	nt) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1.	A U.S. citizen?					☐ Yes	⊠ No				
2.	A green card holder (lawful per	rmanent resident) of the Ur	ited States? .			☐ Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation ru	ules 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 year										
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and	eft the United States durin									
	Note: If you're a resident of C				ent intervals,						
	check the box for Canada or	Mexico and skip to item I	<u> </u>	🗌 Canada	☐ Mexico						
	Date entered United States	Date departed United Stat	es	Date entered United State			d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	nm/dd/yy					
Н	Give number of days (including										
_	2021	, 2022	, an	d 2023365	··	S					
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 U.S. person, or receive a contr					Yes	□No				
V	Did you receive total compens					☐ Yes	□ NO No				
K	If "Yes," did you use an alterna		-			Yes	□ No				
L	Income Exempt From Tax—If										
-	complete (1) through (3) below				tax treaty with	a loreign	country,				
1.	Enter the name of the country,				claimed the tre	atv benefi	t and the				
	amount of exempt income in th				ciamica ino iro	ary borion	i, and ino				
	(a) Cou	ntrv	(b) Tax treaty art	icle (c) Number of month	ns (d) Amo	ount of exe	empt				
	(4)	,		claimed in prior tax ye		current ta					
	(e) Total. Enter this amount or										
	. Were you subject to tax in a foreign country on any of the income shown in 1(d) above?										
3.	. Are you claiming treaty benefits pursuant to a Competent Authority determination?										
	If "Yes," attach a copy of the C	Competent Authority deterr	nination letter to y	our return.							
М	Check the applicable box if:										
1.	This is the first year you are may with a U.S. trade or business u						onnected.				
2.	You have made an election in	` '					ne United				
۷.	States as effectively connected										
				. ,							