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	nission Identification Number (SID)					
Taxpay	ver's name	Social securit	ocial security number			
PRA	NEETH KOLA	344-33-	344-33-6328			
Spouse	e's name	Spouse's soc	ouse's social security number			
Par		ter year you a	re auth	orizing.)		
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	6 ,	,251.	
2	Total tax		2		0.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,016.	
4	Amount you want refunded to you		4	1	,016.	
5	Amount you owe		5		\	
Par	Taxpayer Declaration and Signature Authorization (Be sure you get an penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend					
return to sen for any Agent payme author payme busine taxes persor	lowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I al (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account it ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation reso days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the lad identification number (PIN) below is my signature for the income tax return (original or amended) onic Funds Withdrawal Consent.	smitter, or electrorejection of the trace U.S. Treasury and indicated in the taution to debit the nate the authorizate quests must be the processing of e payment. I furt	enic returniansmission distance description description description. To a receive the election description descrip	n originat on, (b) the signated I ration soft this accor revoke (c d no late tronic pay lowledge	or (ERO) e reason Financial ware for unt. This cancel) a r than 2 yment of that the	
	ayer's PIN: check one box only					
-	I authorize GLOBAL TAXES LLC to enter or genera	te my PIN	6 3	2 8	as my	
_	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five dig n't enter a		ao my	
	I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN and your return is filed using the Practitioner PIN me below.					
Your	signature ▶ Date ▶	•				
Snou	se's PIN: check one box only					
Г	☐ I authorize to enter or genera	te my PIN			as my	
L	ERO firm name		er five dig	aits. but	as my	
	signature on the income tax return (original or amended) I am now authorizing.		i't enter a			
	I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN and your return is filed using the Practitioner PIN mobelow.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue belo	ow				
Part	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 4 9 Don't ente	6 6 1 er all zero		9	
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual incom- rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of	bmitting this retu	rn in acc	cordance		
FRO'	s signature ▶ Date ▶					
LINU	ERO Must Retain This Form — See Instructions					
	LIV WUSE HELDIN THIS FULLE — SEE HISHUCHUIS					

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 begin			nning, 2023, ending, 20			.0	See separate instructions.		
Your first name and middle initial			Last name				Your iden	tifying number	
							(see instructions)		
PRANEETH			KOLA				344-33-6328		
Home address	(numl	per and street). If you have a P.O. box	k, see ins	tructions.				Apt. no.	
2-314 395	S	HIGHLAND STREET							
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code	
MEMPHIS						TN	3	8111	
Foreign country	nam	e	Foreigr	n province/state/county		Foreign p	ostal code		
Filing							☐ Estat	e 🔲 Trust	
Status	1	you checked the QSS box, enter the				,		c 🗀 Hust	
Check only	"	you officiated the QOO BOX, officiallies	orma o m	arrie ir trie qualifying pere	on io a orma bat not y	oui depei	ident.		
one box.									
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a f					(b) sell, ex		
Dependents	+	3			, (====,			qualifies for (see inst.):	
(see instructions):				(2) Dependent's		Child	tax credit	Credit for other	
(,		(1) First name Last name		identifying number	(3) Relationship to you	ı	Tax orcan	dependents	
If more than four							<u> </u>		
dependents, see							<u> </u>	<u> </u>	
instructions and							<u> </u>		
check here	<u> </u>		., .					<u> </u>	
Income	1a	Total amount from Form(s) W-2, box	•	*			1a	6,251.	
Effectively	b	Household employee wages not rep		` '			1b		
Connected	C	Tip income not reported on line 1a (•	· · · · · · · · · · · · · · · · · · ·		1c		
With U.S.	d	Medicaid waiver payments not repo		.,	,		1d		
Trade or	e	Taxable dependent care benefits fro		·			1e 1f		
Business	f	''							
Attach	g h	•	1g 1h						
Form(s) W-2,	i	Other earned income (see instructions)							
1042-S, SSA-1042-S,	i	Reserved for future use					1j		
RRB-1042-S,	, k	Total income exempt by a treaty from					,,		
and 8288-A here. Also	ĸ	line 1(e)		,	1k				
attach	z	Add lines 1a through 1h					1z	6,251.	
Form(s)	2a	Tax-exempt interest 2a	1	ĺ	able interest		2b		
1099-R if tax was	3a	Qualified dividends 3a			linary dividends		3b		
withheld.	4a	IRA distributions		b Tax	able amount		4b		
If you did not	5a	Pensions and annuities 5a	а	b Tax	able amount		5b		
get a Form W-2, see	6	Reserved for future use	6						
instructions.	7	Capital gain or (loss). Attach Schedu	ule D (Fo	rm 1040) if required. If no	ot required, check her	e 🗆	7		
	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 c	onnected income .		9	6,251.	
	10	Adjustments to income from Schedincome	•	, ·			10		
	11	Subtract line 10 from line 9. This is y	your adju	ısted gross income			11	6,251.	
	12	Itemized deductions (from Schedudeduction (see instructions)		13,850.					
	13a	deduction (see instructions)						-,	
	b	Exemptions for estates and trusts o							
	c	Add lines 13a and 13b	• .	•			13c		
	14							13,850.	
	15	Subtract line 14 from line 11. If zero						0.	

Form 1040-NR (2023)							Page 2
Tax and	16	Tax (see instructions). Check if any from	m Form(s): 1	314 2 497	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 dep	19					
	20	Amount from Schedule 3 (Form 1040)	20					
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero o	r less, enter -0				22	0.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line 1:			23a			
	b	Other taxes, including self-employme 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 tot	al tax				24	0.
Payments	25	Federal income tax withheld from:						
•	а	Form(s) W-2			25 a	L,016.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	1,016.
	е	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S					25g	
	26	2023 estimated tax payments and am	ount applied from 20	022 return			26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Sched	ule 8812 (Form 1040)	28			
	29	Credit for amount paid with Form 104	0-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 yo	32					
	33	Add lines 25d, 25e, 25f, 25g, 26, and	32. These are your t o	otal payments .			33	1,016.
Refund	34	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						1,016.
	35a	Amount of line 34 you want refunded		35a	1,016.			
Direct deposit?	b	Routing number 0 6 4 0 0 0 0 2 0 c Type: 🗵 Checking 🗆 Savings						
See instructions.	d	Account number 4 4 4 0 2 5 9 5 1 4 3 1						
	е	If you want your refund check mailed	to an address outsid	de the United State	es not shown on	page 1,		
		enter it here.			,			
-	36	Amount of line 34 you want applied to	o your 2024 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the	-					
You Owe		For details on how to pay, go to www	.irs.gov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instruction	•		38			
Third	Do yo	u want to allow another person to disci	uss this return with t	ne IRS? See instruc	ctions. \square Ye	es. Compl	ete belo	ow. 🗵 No
Party Designee	Designee's Phone Personal identification name number (PIN)							
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to t belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							
Sign	Your	signature	Date	Your occupation		If the	IRS se	nt you an Identity
Here				·				PIN, enter it here
ļ				SOFTWARE J	OR	(see	inst.)	
	Phone		Email address		Data	DTIN	1	Observice of
Paid	Preparer'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		name GLOBAL TAXES LLC						8)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E							3-2145487

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

PRANEETH KOLA

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

344-33-6328

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 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 15

Capital Gains and Losses From Sales or Exchanges of Property

Enter only the capital gains and losses from property sales or exchanges that are from source 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. reproperty 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). Form 4797, or both.

		Carpital Gallie				-,		
nd ces	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).
J.S.								
in real								
e D								
,								
ss	17	Add columns (f) and (g) of line 16 .				17	()	
	18	Capital gain. Combine columns (f) and	(g) of line 17. Ente	er 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 shown on Form 1040-NR Your identifying number									
PRAN	IEETH KOLA				344-33-63				
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:								
							⊠ No		
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 year. F1								
F	Have you ever changed your v If you answered "Yes," indicate		o obongo.	gration status?		∐ Yes	⊠ No		
G	List all dates you entered and		-						
	Note: If you're a resident of C				_				
	check the box for Canada or				☐ 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	- II	nm/dd/yy			
			 						
н	Give number of days (including	vacation nonworkdays and	l 1 partial days) you	were present in the United	States during:				
••		, 2022							
1	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.				⊠ Yes	□No		
J	Are you filing a return for a trus					Yes	⊠ No		
•	If "Yes," did the trust have a l					□ .00	<u></u>		
	U.S. person, or receive a contr					☐ Yes	☐ No		
K	Did you receive total compens	ation of \$250,000 or more	during the tax yea	ar?		☐ Yes	⊠ No		
	If "Yes," did you use an alterna	ative method to determine	the source of this	compensation?		☐ Yes	☐ No		
L	Income Exempt From Tax-If				tax treaty with	a foreign	country,		
	complete (1) through (3) below								
1.	Enter the name of the country,				claimed the tre	aty benefi	t, and the		
	amount of exempt income in th		· · · · · · · · · · · · · · · · · · ·						
	(a) Cou	ntry	(b) Tax treaty art	1 ' '	, ,	ount of exe	•		
				claimed in prior tax ye	ars income ir	current ta	ax year		
	(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it any	where else on line 1					
2.	. Were you subject to tax in a foreign country on any of the income shown in 1(d) above?								
3.	Are you claiming treaty benefit	s pursuant to a Competen	t Authority determ	ination?		☐ Yes	⊠ No		
	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 States as effectively connected								
	-								