## 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	y number			
RIN	IDHA REDDY REDDY	276-49-	276-49-1954			
Spouse	e's name	Spouse's soc	Spouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ent	er year you a	re authorizi	ng.)		
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	22,446.		
2	Total tax		2	858.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2,090.		
4	Amount you want refunded to you		4	1 <b>,</b> 232.		
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your re	eturn)		
return to sen for any Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I also (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfer my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for ry 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 in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization 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 reason 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 neal identification number (PIN) below is my signature for the income tax return (original or amended) I ponic Funds Withdrawal Consent.	emitter, or electro- ejection of the tr U.S. Treasury andicated in the ta- tition to debit the ate the authoriza- equests must be the processing of payment. I furt	nic return orice ansmission, (i) and its designa ax preparation entry to this tition. To revo- received no the electronicher acknowle	ginator (ERO) b) the reason ted Financial a software for account. This ke (cancel) a later than 2 c payment of dge that the		
	ayer's PIN: check one box only					
	▼ I authorize GLOBAL TAXES LLC to enter or generat	e my PIN	1 9 5	$\frac{4}{}$ as my		
٠	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, b n't enter all zer	out		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> 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 generat	e my DIN		as my		
	ERO firm name		er five digits. b			
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zer	os		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue belo	w				
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.		6 0 8 2 er all zeros	7 1		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accorda	nce with the		
FRO'	s signature ▶ Date ▶					
<u> </u>	ERO Must Retain This Form — See Instructions					
	LIDO IVIUSE NELGIII TIIIS FUTIII — SEE ITISERUCIIOTIS					

Don't Submit This Form to the IRS Unless Requested To Do So

# E1040-NR 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 Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023	, ending	, ;	20	See separate instructions.		
Your first name and middle initial		Last name			Your identifying number					
								(see instructions)		
RINDHA			REDD	Y REDDY			276-4	9-1954		
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.		•		Apt. no.		
9986 CAME	RON	RIDGE TRL								
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code		
CORDOVA						TN	3	8016		
Foreign country	/ nam	e	Foreig	n province/state/county		Foreign p	ostal code			
-	1									
Filing	×	Single Married filing sepa	arately (N	MFS) Qualify	ing surviving spouse (	QSS)	☐ Estat	e 🗌 Trust		
Status	If	ndent:								
Check only one box.	ļ									
Digital Assets	Δta	ny time during 2023, did you: (a) rece	ive (as a	reward award or navn	ent for property or se	rvices): or	(h) sell ex	change or		
Digital Assets		erwise dispose of a digital asset (or a								
Dependents	;					(4) Che	ck the box if	qualifies for (see inst.):		
(see instructions)		(1) First name Last name		(2) Dependent's identifying number	(2) Polationahin to vo	Chile	d tax credit	Credit for other		
				ldentilying number	(3) Relationship to yo	u		dependents		
If more than four										
dependents, see instructions and							П			
check here										
Income	1a	Total amount from Form(s) W-2, box	x 1 (see i	nstructions)				22,446.		
Effectively	b	Household employee wages not rep	orted or	n Form(s) W-2			. 1b			
Connected	С	Tip income not reported on line 1a (	see instr	ructions)			. 1c			
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruc	tions)		1d			
Trade or	е	Taxable dependent care benefits from	m Form	2441, line 26			. 1e			
Business	f	Employer-provided adoption benefit		·			. 1f			
Attach	g	Wages from Form 8919, line 6					1g			
Form(s) W-2,	h	Other earned income (see instructio	,				. 1h			
1042-S, SSA-1042-S,	i :	Reserved for future use					4:			
RRB-1042-S,	J	Reserved for future use			1 1		. 1j			
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)			1k					
attach	z	Add lines 1a through 1h					. 1z	22,446.		
Form(s)	2a	Tax-exempt interest 2a	1	1	xable interest		2b	,		
1099-R if tax was	3a	Qualified dividends 3	_		dinary dividends		3b			
withheld.	4a	IRA distributions 4		<b>b</b> Ta	xable amount		4b			
If you did not	5a	Pensions and annuities 5a	a	<b>b</b> Ta	xable amount		. 5b			
get a Form W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,						
	8	Additional income from Schedule 1								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		-				22,446.		
	10	Adjustments to income from Schedincome		•	•					
	11	Subtract line 10 from line 9. This is y		22,446.						
	12	Itemized deductions (from Schedu						22, 110.		
	12	deduction (see instructions)		13,850.						
	13a	Qualified business income deductio		,						
	b	Exemptions for estates and trusts o								
	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	axable income		15	8,596.		

Form 1040-NR (	2023)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): <b>1</b>	314 <b>2</b>	4972	3 🗌		16	858.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17	18	858.						
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (For	rm 1040)			19	
	20	Amount from Schedule 3 (Form	20							
	21	Add lines 19 and 20	21							
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	858.
	23a	Tax on income not effectively co	nnected w	ith a U.S. trade	or business f	rom				
		Schedule NEC (Form 1040-NR),	line 15 .			. 23	а			
	b	Other taxes, including self-empl	oyment ta	x, from Schedul	e 2 (Form 10	40),				
		line 21				. 23	b			
	С	Transportation tax (see instruction	ons)			. 23	С			
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is yo	ur <b>total ta</b>	<b>x</b>					24	858.
<b>Payments</b>	25	Federal income tax withheld from	m:							
	а	Form(s) W-2				. 25	а	2,090.		
	b	Form(s) 1099				. 25	b			
	С	Other forms (see instructions)				. 25	С			
	d	Add lines 25a through 25c							25d	2,090.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar	nd amount	applied from 20	)22 return .				26	
	27	Reserved for future use				. 27	7			
	28	Additional child tax credit from S	Schedule 8	3812 (Form 1040	)	. 28	3			
	29	Credit for amount paid with Form	n 1040-C			. 29	)			
	30	Reserved for future use				. 30	)			
	31	Amount from Schedule 3 (Form								
	32	Add lines 28, 29, and 31. These	32							
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	tal paymen	ts			33	2,090.
Refund	34	If line 33 is more than line 24, su	34	1,232.						
	35a	Amount of line 34 you want refu						📙	35a	1,232.
Direct deposit?	b	Routing number 2 7 1 1 8 6 4 2 3 c Type: X Checking Savings								
See instructions.	d	Account number 0 9 8 3								
	е	If you want your refund check n								
		enter it here.								
	36	Amount of line 34 you want app				. 36	6			
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .								
You Owe		For details on how to pay, go to	-	-		1			37	
		Sestimated tax penalty (see instructions)								
Third	•	•	es. Compl		ow. 🗵 <b>No</b>					
Party	•	Designee's Phone Personal identifi								
Designee	namenonumber (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge									
		they are true, correct, and complete. I								
Sign								•	ent you an Identity	
Here	Your signature			Date Your occupation						PIN, enter it here
11016								l l	inst.)	•
	Phone no. Email address									
Paid	Prepa	rer's name	Preparer	's signature		Da	te	PTIN		Check if:
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA	SYAM	PRIYA RAM	SAGAR GU	PTA 04	/13/2024	P02082	703	Self-employed
-	Firm's	s name GLOBAL TAXES	LLC					Phone no	o. (6	78)965-9522
Use Only Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816							Firm's EIN 84-3171965			

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 RINDHA REDDY REDDY 276-49-1954 Enter **amount of income** under the appropriate rate of tax. See instructions.

Notice of Income		4 > 4004		4 3 0004	(d) Other (specify)					
	Nature of Income		(a) 10%		<b>(b)</b> 15%	(c) 30%	%	%		
1	Dividends and divide	end ec	uivalents:							
а	Dividends paid by U.	.S. co	rporations		1a					
b	Dividends paid by fo	reign	corporations		1b					
С	Dividend equivalent p	ayme	nts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	oratio	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	сору	right royalties		4					
5	Other royalties (copy	rights/	, recording, publishing, etc.)		5					
6	Real property incom-	e and	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling—Resident If zero or less, ente	ts of C	anada only. Enter net income in column (c	c).						
_									+	
a	Winnings				10c				+	
b 11	Losses Gambling—Resident	ts of c	· · · · · · · · · · · · · · · · ·		100					
••	Note: Enter winning		s only. Losses aren't allowed							
12	Other (specify):									
					12					
13	Add lines 1a through	12 in	columns (a) through (d)		13					
14	Multiply line 13 by r	ate o	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines	ss. Add colum	nns (a)	through (d) of line 14	4. Enter the total here	e and on Form 1040	-NR, line 23a <b>15</b>	
			Capital Gains an	d Losses F	rom	Sales or Excha	anges 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 effectively connected with a U.S. business. Do not include a gain		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).
or loss	on disposing of a U.S. real y interest; report these									
gains ai	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively							1		
	ted with a U.S. business edule D (Form 1040),								( )	
Form 4797, or both.		18	Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	r-0 <b>18</b>	

#### **SCHEDULE OI** (Form 1040-NR)

#### **Other Information**

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C** 

Internal Revenue Service

vame	snown on Form 1040-NR				Your identifying						
RIN	DHA REDDY REDDY			276-49-19							
Α	Of what country or countries were you a ci	izen or national dur	ing the tax year?	INDIA							
В	In what country did you claim residence for tax purposes during the tax year? India										
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 holder (lawful permanent residual)					Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pub. 5	•									
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 tay year $-\pi^1$										
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and left the Unite	d States during 202	3 See instruction	 าร							
•	Note: If you're a resident of Canada or Me				ent intervals						
	check the box for Canada or Mexico and				☐ Mexico						
		ed United States		te entered United States		rtod I Inito	1 States				
		m/dd/yy	Dai	mm/dd/yy		nm/dd/yy	Joiales				
	,,										
н	Give number of days (including vacation, nor	 workdays, and parti	∟ ial davs) vou were	present in the United S	l States during:						
	2021, 2022										
ı	Did you file a U.S. income tax return for an	/ prior vear?			···	Yes	⊠ No				
-	If "Yes," give the latest year and form numl	per vou filed:									
J	Are you filing a return for a trust?					Yes	⊠ No				
	If "Yes," did the trust have a U.S. or foreig										
	U.S. person, or receive a contribution from					☐ Yes	□No				
K	Did you receive total compensation of \$250	-				☐ Yes	⊠ No				
	If "Yes," did you use an alternative method					Yes	□No				
L	Income Exempt From Tax—If you are cla						_				
_	complete (1) through (3) below. See Pub. 9				ax troaty with	a rororgii	oountry,				
1.	Enter the name of the country, the applicable	e tax treatv article. t	he number of mo	nths in prior vears you	claimed the tre	atv benefi	t, and the				
	amount of exempt income in the columns be					,	,				
	(a) Country	(b) -	Tax treaty article	(c) Number of month	d) Amount of exempt						
	, ,	` `	,	claimed in prior tax yea							
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
2.											
3.	3. Are you claiming treaty benefits pursuant to a Competent Authority determination?										
	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
М	Check the applicable box if:		-								
1.		tion to treat income	e from real proper	ty located in the Unite	d States as eff	ectively c	onnected				
	with a U.S. trade or business under section 871(d). See instructions										
2.	You have made an election in a previous										
	States as effectively connected with a U.S.	trade or business u	ınder section 871	(d). See instructions .			. 🗆				