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

Submi	ission Identification Number (SID)							
Taxpayer's name					Social security number			
ROHITH GOUD MALLARAPU					270-45-3350			
Spouse's name				Spouse's social security number				
Part	Tax Return Information — Tax Year Ending December 31, 2023	∃ (Enter	vear vou	ı are au	thorizing	.)		
	whole dollars only on lines 1 through 5.	3 (=:::0:	year yea			-/		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income			1	1	,000.		
2	Total tax					0.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3				
4	Amount you want refunded to you			4				
5	Amount you owe			5		0.		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you go	et and k	еер а с	opy of y	our retu	ırn)		
to send for any Agent t payment authori payment business taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I author to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to not, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancelles days prior to the payment (settlement) date. I also authorize the financial institutions involve to receive confidential information necessary to answer inquiries and resolve issues related tall identification number (PIN) below is my signature for the income tax return (original or ame	on for rejective the U. count indiction institution terminate ation requed in the part of	ction of the S. Treasury cated in the n to debit the authorests must processing ayment. I feet the second s	e transmin y and its of e tax prep the entry rization. To be recei of the el further ac	ssion, (b) the designated coaration so to this according revoke wed no late lectronic packnowledge.	he reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the		
	onic Funds Withdrawal Consent.		г					
	ayer's PIN: check one box only		DIN	5 3 3	3 5 0			
×	I authorize GLOBAL TAXES LLC to enter or g	enerate r	ny PiN 5		digits, but	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)	d) Lam no	ow author		er all zeros neck this l	oox only		
	if you are entering your own PIN and your return is filed using the Practitioner P below.							
Your s	signature ▶	oate ► _						
Snous	se's PIN: check one box only		_					
Ороца	I authorize to enter or g	onorato r	ny DINI			ac my		
L	ERO firm name	enerate i	_	Enter five	digits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.				er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.							
Spous	se's signature ▶ □	oate ►						
	Practitioner PIN Method Returns Only—continue	e below						
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	6 0 enter all ze	8 2 7	7 1		
			Don't	an Ze				
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Prov	am submi	tting this r	eturn in a	accordance			
ERO's	s signature ► □	oate ►						
	ERO Must Retain This Form — See Instruct	tions						
	Don't Submit This Form to the IRS Unless Request	ed To D	o So					

E 1040-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 Jar	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	0	See separate instructions.	
Your first name and middle initial		Last name			Your identifying number				
							(see instru	ctions)	
ROHITH GOUD			MALLARAPU				270-45-3350		
Home address (number and street). If you have a P.O. box				tructions.				Apt. no.	
421 MENDO	ZA								
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.	(State	ZII	P code	
KYLE					ı	ΓX	7:	8640	
Foreign country	nam nam	e	Foreign	n province/state/county	ı	oreign po	ostal code		
Filing	×	Single	arately (N	ΛΕS) □ Qualifvii	ng surviving spouse (C	(22)	☐ Estate	e 🔲 Trust	
Status		you checked the QSS box, enter the	• •		0 , ,	,		o 🗀 must	
Check only	"	you oncolled the QOO BOX, office the	orma o m	arrio il tiro qualifying port	oon to a orma bar nor y	oui dopoi	idorit.		
one box.									
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a t					(b) sell, exc		
D	+	i wise dispose of a digital asset (of a	ilialiciai	linterest in a digital asse				U Yes ⊠ No qualifies for (see inst.):	
Dependents (see instructions):				(2) Dependent's		1		Credit for other	
(See Instructions)		(1) First name Last name		identifying number	(3) Relationship to you	Child	tax credit	dependents	
If mare than four									
If more than four dependents, see									
instructions and									
check here							Ц		
Income	1a	Total amount from Form(s) W-2, box	,	,			1a	1,000.	
Effectively	b	Household employee wages not rep		` '			1b		
Connected	С	Tip income not reported on line 1a (1c		
With U.S.	d	Medicaid waiver payments not repo		` ' ` ` `	,		1d		
Trade or	е	Taxable dependent care benefits fro		•			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 Ie	Total income exempt by a treaty from			1 1		1j		
and 8288-A	k	line 1(e)			1k				
here. Also attach	z	Add lines 1a through 1h					1z	1,000.	
Form(s)	2a	Tax-exempt interest 2a	1	1	cable interest		2b	_,	
1099-R if tax was	3a	Qualified dividends 3a	_		dinary dividends		3b		
withheld.	4a	IRA distributions 4			cable amount		4b		
If you did not	5a	Pensions and annuities 5a	а	b Tax	cable amount		5b		
get a Form	6	Reserved for future use	6						
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	7						
	8	Additional income from Schedule 1	8						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	9	1,000.					
	10	Adjustments to income from Schedincome	10						
	11	Subtract line 10 from line 9. This is y	11	1,000.					
	12	Itemized deductions (from Schedu	d						
		deduction (see instructions)		13,850.					
	13a	Qualified business income deductio							
	b	Exemptions for estates and trusts o	nly (see i	instructions)	13b				
	С	Add lines 13a and 13b					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 (2023)									Page 2	
Tax and	16	Tax (see instructions). Check if any from	m Form(s): 1	314 2 [4972	3			16	0.	
Credits	17	Amount from Schedule 2 (Form 1040)	, line 3						17	0.	
	18								18	0.	
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)									
	20	Amount from Schedule 3 (Form 1040), line 8									
	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	ed with a U.S. trade	or business	from						
		Schedule NEC (Form 1040-NR), line 1	5			23a					
	b	Other taxes, including self-employme	nt tax, from Schedule	e 2 (Form 10	040),						
		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				25a					
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c							25d		
	е	Form(s) 8805							25e		
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments and am							26		
	27	Reserved for future use			.	27					
	28	Additional child tax credit from Sched	ule 8812 (Form 1040)		. Г	28					
	29	Credit for amount paid with Form 104	0-C			29					
	30	Reserved for future use			. Г	30					
	31	Amount from Schedule 3 (Form 1040)				31					
	32	Add lines 28, 29, and 31. These are ye			_	le cre	dits		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and							33		
Refund	34	If line 33 is more than line 24, subtrac							34		
	35a	Amount of line 34 you want refunded				•	-		35a		
Direct deposit?	b	Routing number X X X X X	X X X X	c Type:	□ c	heckir	ıg 🗌	Savings			
See instructions.	d	Account number X X X X X						_			
	е	If you want your refund check mailed						page 1,			
		enter it here.									
	36	Amount of line 34 you want applied t	o your 2024 estimate	ed tax .		36			-		
Amount	37	Subtract line 33 from line 24. This is the	ne amount you owe .		'						
You Owe		For details on how to pay, go to www	.irs.gov/Payments or	see instruct	ions .				37	0.	
	38	Estimated tax penalty (see instruction	s)		.	38					
Third	Do you want to allow another person to discuss this return with the IRS? See instructions. Yes. Comp							lete be	low. 🗵 No		
Party	Designee's Phone Personal identif										
Designee	name no number (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 and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Sign	Your	signature	Date Your occupation				If th	e IRS s	ent you an Identity		
Here			- 3.13		,					PIN, enter it here	
	SOFTWARE ENGINEER (see						inst.)				
	Phone	e no.	Email address								
Paid	Prepa	rer's name Prep	parer's signature	-		Date		PTIN		Check if:	
	SYAM	M PRIYA RAM SAGAR GUPTA SYA	AM PRIYA RAM S	SAGAR GU	JPTA	04/08	/2024	P0208	2703	Self-employed	
Preparer	Firm's name CIODAI TAVES TIC										
Use Only	Firm's		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

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

270-45-3350 ROHITH GOUD MALLARAPU 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 C 3 4 5 Real property income and natural resources royalties . . . 6 7 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 16 (a) Kind of property and description (f) LOSS (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 descriptive details not shown below) subtract (d) from (e). 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 17 Add columns (f) and (g) of line 16 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

lame s	hown on Form 1040-NR				Your identifying	number				
ROHI	TH GOUD MALLARAPU				270-45-33	350				
Α	Of what country or countries we	ere you a citizen or nationa	I during the tax y	/ear? INDIA						
В	Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? India									
С	Have you ever applied to be a g		☐ Yes	⊠ No						
D	Were you ever:			•						
1.	-					☐ Yes	⊠ No			
2.	A green card holder (lawful pern			☐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2),	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. $_{\rm F1}$									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and le	ft the United States during	2023. See instr	uctions.						
	Note: If you're a resident of Car				ient intervals,					
	check the box for Canada or N	Mexico and skip to item H	<u>.</u>	\square Canada	☐ Mexico					
		Date departed United State	es	Date entered United State	s Date depa	rted United	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy				
Н	Give number of days (including va									
	2021	, 2022	, an	d 2023365	··		∇			
I	Did you file a U.S. income tax re If "Yes," give the latest year and	I form number you filed:				∐ Yes	⊠ No _			
J	Are you filing a return for a trust	?				☐ Yes	⊠ No			
	If "Yes," did the trust have a U. U.S. person, or receive a contrib					☐ Yes	□No			
K	Did you receive total compensation	tion of \$250,000 or more o	during the tax yea	ar?		☐ Yes	⊠ No			
	If "Yes," did you use an alternati	ive method to determine tl	ne source of this	compensation?		☐ Yes	☐ No			
L	Income Exempt From Tax—If y complete (1) through (3) below.				tax treaty with	a foreign	country,			
1.	Enter the name of the country, the amount of exempt income in the				claimed the tre	aty benefit	t, and the			
	(a) Count	try	(b) Tax treaty ar	ticle (c) Number of montl	s (d) Amount of exempt					
				claimed in prior tax ye	ars income i	n current ta	x year			
	(a) Takal Fakas (C)	F 1040 ND 1' 4' 5								
•	(e) Total. Enter this amount on		•			Yes	□ NI =			
2.	Were you subject to tax in a fore			• •		_	□ No ⊠ No			
3.	Are you claiming treaty benefits		-			∐ Yes	△ NO			
N/I	If "Yes," attach a copy of the Co	ompetent Authority determ	iiilation letter to y	your return.						
M 1	Check the applicable box if: This is the first year you are maken	king an election to treat in	come from real n	roperty located in the Unit	ad States as of	factivaly o	nnected			
	with a U.S. trade or business un	nder section 871(d). See in:	structions							
2.	You have made an election in States as effectively connected									