Form 8879
(Rev. January 2021)
Department of the Treesure

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayor'a pama

Taxpayer S hame	Social Security number
AYYAPPA SAI KUMAR SANNIDHI	677-93-2517
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are authorizing.)
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 2,314.
2 Total tax	2 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	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep 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	
				ERO firm name		

3	2	5	1	7	
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	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 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 Me	hod 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 🕨	
ERO Mu Don't Submit Th			
For Banamuark Baduation Act Nation and your tax	aturn instructions	DEV/ 02/07/24 DBO	Earm 8879 (Pay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

1040	-	Department of the Treasury-Inte U.S. Nonresident A		x Return	2023	OMB No. 1	545-0074		Only-Do not write ple in this space.
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year begin	ning	ing, 2023, ending			, 20	See separate instructions.	
Your first name	and	middle initial	Last name				Your i		ing number
							(see in	structio	ns)
AYYAPPA S	SAI	KUMAR	SANNIDHI				677	-93-2	2517
		ber and street). If you have a P.O. bo	k, see instructions.						Apt. no.
		D HILL DRIVE							
		ffice. If you have a foreign address, a	so complete spaces b	elow.		State		ZIP co	
MANCHESTE			I- · · · · · · · · · · · · · · · · · · ·	. , .		CT		0604	42
Foreign country	nar	16	Foreign province/sta	ate/county		Foreign	postal co	ode	
Filing			-						
Status		Single Darried filing sep			g surviving spous		E	state	Trust
Check only	li	you checked the QSS box, enter the	child's name if the qua	alifying perso	on is a child but n	ot your dep	endent:		
one box.	-							-	
Digital Assets		any time during 2023, did you: (a) rece							
	oth	erwise dispose of a digital asset (or a	financial interest in a c	digital asset)?	? (See instructions	s.)			Yes 🔀 No
Dependents				!!!-		(4) CI	neck the bo		ifies for (see inst.):
(see instructions):		(1) First name Last name	(2) Deper identifying		(3) Relationship to	you Ch	ild tax cre	dit	Credit for other dependents
						-			
If more than four dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see instructions)				. 1a	a 📃	2,314.
Effectively	b	Household employee wages not rep	ported on Form(s) W-2				. 11)	
Connected	С	Tip income not reported on line 1a							
With U.S.	d	Medicaid waiver payments not repo							
Trade or	e	Taxable dependent care benefits fro					. 10		
Business	f	Employer-provided adoption benefit					. 11	_	
Attach	g h	Wages from Form 8919, line 6 . Other earned income (see instruction					· 10		
Form(s) W-2, 1042-S,	; ;	Reserved for future use					. "		
SSA-1042-S,	i	Reserved for future use					. 1	i	
RRB-1042-S,	, k	Total income exempt by a treaty fro			em L.				
and 8288-A here. Also		line 1(e)			. 1k				
attach	z	Add lines 1a through 1h					. 12	z	2,314.
Form(s) 1099-R if	2a	Tax-exempt interest 2	a	b Taxa	ble interest		. 2ł)	
tax was	3a	Qualified dividends 3		-	nary dividends .)	
withheld.	4a		a	-	ble amount			-	
lf you did not get a Form	5a	Pensions and annuities 5			ble amount				
W-2, see	6 7	Reserved for future use							
instructions.	7 8	Additional income from Schedule 1		•					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and							2,314.
	10	Adjustments to income from Sched	•	-					
	10				•	-		b	
	11	Subtract line 10 from line 9. This is	your adjusted gross i	ncome .			. 1	1	2,314.
	12	Itemized deductions (from Sched							
		deduction (see instructions) .			Std Dedn US	/India Ir	eạty 1 2	2	13,850.
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts of							
	c	Add lines 13a and 13b							10 070
	14 45		· · · · · · ·						13,850.
	15	Subtract line 14 from line 11. If zero			able income .		. 1		0.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040-NR (2023)								Page 2
Tax and	16	Tax (see instructions). Check if an	y from Foi	rm(s): 1 🗌 88	314 2 497	2 3		16	0.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3				17	0.
	18	Add lines 16 and 17						18	0.
	19	Child tax credit or credit for other	r depende	ents from Sched	ule 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form 1	040), line	8				20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0				22	0.
	23a	Tax on income not effectively cor	nected w	vith a U.S. trade of	or business from				
		Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo							
		line 21				23b			
	с	Transportation tax (see instructio	ns)			23c			
	d	Add lines 23a through 23c	,					23d	
	24	Add lines 22 and 23d. This is you							0.
ayments	25	Federal income tax withheld from							
aymento	a	Form(s) W-2				25a			
	b	Form(s) 1099				25b			
	c	Other forms (see instructions)				255 25c			
	d	Add lines 25a through 25c						25d	
	e	Form(s) 8805						25u	
	f	Form(s) 8288-A						25e	
								25r	
	g	Form(s) 1042-S						25g 26	
	26 07	1,5						20	
	27	Reserved for future use				27		_	
	28	Additional child tax credit from S			,	28		_	
	29	Credit for amount paid with Form				29		_	
	30	Reserved for future use				30		_	
	31	Amount from Schedule 3 (Form 1				31			
	32	Add lines 28, 29, and 31. These a							
	33	Add lines 25d, 25e, 25f, 25g, 26,							
efund	34	If line 33 is more than line 24, sub						_	
	35a	Amount of line 34 you want refu							
rect deposit? e instructions.	b	Routing number X X X X			c Type:		Saving	S	
	d	Account number X X X X							
	е	If you want your refund check m							
		enter it here.				1			
	36	Amount of line 34 you want appl				36			
mount	37	Subtract line 33 from line 24. This		-					
ou Owe		For details on how to pay, go to	0	2				37	0.
	38	Estimated tax penalty (see instru-				38			(1)
hird	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions. 🗌 Ye	es. Cor	nplete bel	ow. 🛛 No
arty	Desig			Phone				ntification	
esignee	name						er (PIN)		
		penalties of perjury, I declare that I hav they are true, correct, and complete. D							
ign									, ,
-	Your	signature		Date	Your occupation				ent you an Identity
ere					STUDENT			rotection i see inst.)	PIN, enter it here
	Phone	200		Email address			(3		
		rer's name	Prenarer	's signature		Date	PTIN	I	Check if:
aid	•		•	e	יייאס דעד ד			70022	Self-employed
reparer		TA SAI PAVAN KUMAR DUDIPALLI		SAI PAVAN KU	JMAR DUDIPALLI			70833	
i chai ci		name GLOBAL TAXES I	ЪГС				Phone	eno. (6'	78)965-9522
Ise Only		address 245 ROONEY C			- 00015		Firm's		8-2145487

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Form 4797, or both.

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074 $\mathbf{M} \mathbf{M} \mathbf{M}$

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

	J
Attachment	70
Sequence No.	10

Your identifying number

677-93-2517

AYYAPPA SAI KUMAR SANNIDHI E at a ما د بر د ام

Enter a	amount of income und	er the a	appropriate rate of tax. See instructions.							
	Nature of Income					(a) 10% (b) 15%	(c) 30%	(d) Other	(specify)	
					_	(a) 10%	(b) 1378	(C) 50 %	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U	.S. cor	porations		1a					
b	Dividends paid by fo	reign d	corporations		1b					
с	Dividend equivalent p	aymer	ts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	oratior	IS		2b					
с	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property incom	e and i	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling-Resident	ts of C r -0	anada only. Enter net income in column (c	c).						
а	Winnings									
b	Losses				10c					
11	Gambling-Resident	ts of co s only.	ountries other than Canada.		11					
12										
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines)-NR, line 23a 15	
			Capital Gains an	d Losses	From	Sales or Excha	anges of Proper	ty		
losses t exchan	nly the capital gains and from property sales or ges that are from sources he United States and not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy		(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).
	ely connected with a U.S. s. Do not include a gain									
or loss	loss on disposing of a U.S. real									
gains a	y interest; report these nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
								17	()	

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

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

	ent of the Treasury	Go t	o www.irs.gov/Form1040NI		the latest information		Attachment	
	Revenue Service		Ansv	wer all questions.			Sequence N	o. 70
	nown on Form 1040					Your identifyin		
	APPA SAI KU					677-93-	2517	
Α			vere you a citizen or nationa					
В	In what country	/ did you claim	residence for tax purposes	s during the tax year	United States			
С	•	••	green card holder (lawful p	ermanent resident) of	f the United States? .		∐ Yes	X No
D	Were you ever:						—	
	A U.S. citizen?							🔀 No
2.	-		rmanent resident) of the Un				∐ Yes	🗙 No
_	•	., .	2), see Pub. 519, chapter 4,					
E			day of the tax year, enter y day of the tax year. $F1$		didn't have a visa, en	•		
F	Have you ever	changed your v	visa type (nonimmigrant stat					X No
	If you answered	d "Yes," indicat	e the date and nature of the	e change:				
G	List all dates yo	ou entered and	left the United States during	g 2023. See instructio	 ons.			
	•		Canada or Mexico AND con			ient intervals,		
	check the box	for Canada or	r Mexico and skip to item H		🗌 Canada	🗌 Mexico		
	Date entered	United States	Date departed United State	es Da	ate entered United State	s Date de	parted United	d States
	mm/o	dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
н	Give number of	days (including	vacation, nonworkdays, and	partial days) you wer	e present in the United	States during:		
	2021		, 2022	, and 20	365			
I .			return for any prior year? .				🗙 Yes	🗌 No
	If "Yes," give th	ie latest year ar	nd form number you filed:	10	40nr			
J	Are you filing a	return for a tru	st?				🗌 Yes	🗙 No
			U.S. or foreign owner unde					
	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	during the tax year? .			🗌 Yes	🗙 No
	If "Yes," did yo	u use an alterna	ative method to determine t	he source of this con	pensation?		🗌 Yes	🗌 No
L			f you are claiming exempti			tax treaty wi	th a foreign	country,
	complete (1) the	rough (3) below	. See Pub. 901 for more inf	ormation on tax treat	ies.			
1.			the applicable tax treaty art			claimed the t	reaty benefi	t, and the
	amount of exem	npt income in th	e columns below. Attach Fo					
		(a) Cou	intry	(b) Tax treaty article	(c) Number of month			
					claimed in prior tax ye	ars income	e in current ta	ax year
	(e) Total. Enter	r this amount o	n Form 1040-NR, line 1k. D	o not enter it anywhe	re else on line 1			
2.			preign country on any of the				🗌 Yes	🗌 No
3.	Are you claimin	g treaty benefit	ts pursuant to a Competent	Authority determinat	ion?		🗌 Yes	🗙 No

If "Yes," attach a copy of the Competent Authority determination letter to your return.

M 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 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 03/07/24 PRO Schedule OI (Form 1040-NR) 2023