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.

Submission Identification Number (SID)

Taxpay	er's name		Soc	ial secu	rity numl	ber
SRI	KANTH LANKAPALLI		7	94-3	0-966	1
Spouse	's name		Spo	use's s	ocial sec	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (B	Enter	yea	r you	are au	thorizing.)
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	4,000.
2	Total tax				2	0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	169.
4	Amount you want refunded to you				4	169.
5	Amount you owe				5	
Part						our 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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN

0	9	6	6	1	as mv
Ent don	er fiv i't er	/e di iter a	gits, all ze	but ros	asiny

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.

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 signa	ature 🕨 🛛 Da	ate 🕨	•				 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Ce	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			6 all ze	 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 🕨										
	ist Retain This Form — See Ins his Form to the IRS Unless Rec										
For Deperture Reduction Act Notice, and your tax		BEV 02/07/24 BBO	Earm 8879 (Pov. 01 2021)								

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

1040)-	NR Department of the Treasury-Inte U.S. Nonresident AI	rnal Revenue Se ien Incom	ervice ne Tax Return	2023	OMB No. 15	545-0074			
For the year Ja	n. 1-	Dec. 31, 2023, or other tax year beginr	ning	, 2023,	ending	,	20	See separate		
Your first name	e and	middle initial	Last name					dentifyir structior	ng number	
SRIKANTH			LANKAPA	LLI				-30-9	,	
Home address	(nur	nber and street). If you have a P.O. box	k, see instructi	ons.					Apt. no.	
337 PARK										
City, town, or p	ost	office. If you have a foreign address, al	so complete s	paces below.		State		ZIP co	de	
BRIDGEPO	RТ					CT		0660	4	
Foreign countr	y na	ne	Foreign prov	vince/state/county		Foreign	postal co	bde		
Filing Status Check only one box.	-	Single Married filing sep f you checked the QSS box, enter the	child's name i	f the qualifying pers		ot your dep		-	Trust	
Digital Asset		any time during 2023, did you: (a) rece nerwise dispose of a digital asset (or a								
Dependents	5					(4) Ch	eck the b	ox if qualif	ies for (see inst.):	
(see instructions	:	(1) First name Last name		(2) Dependent's dentifying number	(3) Relationship to	Chi	ld tax cre	alt I -	redit for other dependents	
						you				
If more than fou									<u> </u>	
dependents, see instructions and										
check here							$\overline{\Box}$			
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see instru	ctions)			. 1a	a '	4,000.	
Effectively	k	Household employee wages not rep	orted on Forn	n(s) W-2....			. 11	>		
Connected	c	Tip income not reported on line 1a	see instruction	ns)			. 10	>		
With U.S.	c	Medicaid waiver payments not repo	rted on Form(s) W-2 (see instruct	ions)		. 10	ł		
Trade or	e	Taxable dependent care benefits from	om Form 2441	, line 26			. 10	•		
Business	f	Employer-provided adoption benefi	ts from Form 8	8839, line 29			. 11	F		
Attach	ç	Wages from Form 8919, line 6					. 19	3		
Form(s) W-2,	ł						. 11	۱		
1042-S,	i	Reserved for future use								
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1		. 1	i		
and 8288-A	k	· · · · · · · · · · · · · · · · · · ·								
here. Also attach	-	line 1(e)					. 12		4,000.	
Form(s)	z 2a	-	1		able interest				4,000.	
1099-R if tax was	38	· ·	a		inary dividends .					
withheld.	4a		a		able amount					
lf you did not	5a	Pensions and annuities 5	a	b Tax	able amount		. 5ł	b		
get a Form	6	Reserved for future use		· · · · · · ·			. 6			
W-2, see instructions.	7	Capital gain or (loss). Attach Sched	ule D (Form 10	040) if required. If no	ot required, check	here	7			
	8	Additional income from Schedule 1	(Form 1040), I	ine 10			. 8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is your	total effectively co	onnected income		. 9		4,000.	
	10	Adjustments to income from Scheolincome		040), line 26. These	•	-		b		
	11	Subtract line 10 from line 9. This is	your adjusted	gross income			. 1'	I	4,000.	
	12	Itemized deductions (from Scheduction (see instructions) .						2	13,850.	
	13a									
	k	Exemptions for estates and trusts o	nly (see instru	ctions)	13b					
	c	Add lines 13a and 13b					. 13	c		
	14							1	13,850.	
	15	Subtract line 14 from line 11. If zero					. 15		0.	

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

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if any from Form	ı(s): 1 🗌 88	14 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 dependent	ts from Schedu	le 8812 (Form 10	40) .			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,						22	0.
	23a	Tax on income not effectively connected with	h a U.S. trade c	r business from					
		Schedule NEC (Form 1040-NR), line 15 .			23a				
	b	Other taxes, including self-employment tax,							
		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 total tax						24	0.
Payments	25	Federal income tax withheld from:							
, ,	а	Form(s) W-2			25a		169.		
	b	Form(s) 1099			25b				
	с	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	169.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments and amount a						26	
	27	Reserved for future use	• •		27				
	28	Additional child tax credit from Schedule 88			28				
	29	Credit for amount paid with Form 1040-C			29				
	30	Reserved for future use			30				
	31	Amount from Schedule 3 (Form 1040), line 1			31				
	32	Add lines 28, 29, and 31. These are your tot			ble cre	dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The						33	169.
Refund	34	If line 33 is more than line 24, subtract line 2						34	169.
	35a	Amount of line 34 you want refunded to you			-	-		35a	169.
Direct deposit?	b	Routing number 0 2 2 0 0 0 0		c Type: 🛛			Savings		
See instructions.	d	Account number 6 5 0 1 7 0					U		
	е	If you want your refund check mailed to an a		e the United State	es not s	hown on I	bage 1.		
		enter it here.					•		
	36	Amount of line 34 you want applied to your	2024 estimate	dtax.	36				
Amount	37	Subtract line 33 from line 24. This is the amo							
You Owe		For details on how to pay, go to www.irs.gov	/Payments or s	see instructions .				37	
	38	Estimated tax penalty (see instructions) .			38				
Third	Do yo	u want to allow another person to discuss this	s return with th	e IRS? See instru	ctions.	Ye:	s. Compl	ete bel	ow. 🛛 No
Party	Desig	nee's	Phone				al identifi		
Designee	name		20			number	(PIN)		
		penalties of perjury, I declare that I have examined t							
0	belief,	they are true, correct, and complete. Declaration of	preparer (other th	an taxpayer) is base	ed on all	information	of which p	orepare	^r has any knowledge.
Sign	Your	signature [Date	Your occupation					ent you an Identity
Here					NCTNI				PIN, enter it here
	Dhara			SOFTWARE E	NGINI	5EK	(see	inst.)	
	Phone	e no. It irer's name Preparer's	Email address		Date		PTIN		Check if:
Paid	•		0	יייייםוום מאש	Daie			022	Self-employed
Preparer			SAL PAVAN KU	MAR DUDIPALLI			P02470		
Use Only		name GLOBAL TAXES LLC		00016			Phone no		78)965-9522
		address 245 ROONEY CT E BRU		υνάτο			Firm's El		8-2145487
GO 10 WWW.IPS.	<i>J</i> UV/ F 0	m1040NR for instructions and the latest information	uon.	BAA	REV 0	3/07/24 PRO		FC	orm 1040-NR (2023)

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Other (specify):

Enter only the capital gains and

exchanges that are from sources

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

losses from property sales or

12

13

14

15

(Form 1040).

Report property sales or exchanges that are effectively connected with a U.S. business

Form 4797, or both.

on Schedule D (Form 1040).

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Sequence No. 7B Your identifying number

Attachment

701 20 0661

SRIKANTH LANKAPALLI

SKI	KANIH LANKAPALLI					/94-30-966	21
Enter a	amount of income under the appropriate rate of tax. See instructions.						
	 b Dividends paid by foreign corporations		(a) 10%	(b) 15%	(c) 30%	(d) Other (s	specify)
			(a) 1070	(b) 13%	(C) 50 %	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b		10c					
11	Gambling—Residents of countries other than Canada.						

11

12

13

14

Capital Gains and Losses From Sales or Exchanges of Property

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-

(c) Date sold

mm/dd/yyyy

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

(b) Date acquired

mm/dd/yyyy

16

Note: Enter winnings only. Losses aren't allowed

(a) Kind of property and description

(if necessary, attach statement of

descriptive details not shown below)

17 Add columns (f) and (g) of line 16

(d) Sales price

(e) Cost or

other basis

17 (

18

(g) GAIN

If (d) is more than (e),

subtract (e) from (d).

15

(f) LOSS

If (e) is more than (d),

subtract (d) from (e).

. .

SCHEDULE OI

Other Information

OMB No. 1545-0074

(Form	1040-NR)						202	23
	ent of the Treasury Revenue Service	Go t	-		the latest information.		Attachment Sequence No	7C
		-NR			Yo	ur identifying		
SRIK	ANTH LANKA	PALLI			7	94-30-9	661	
Α	Of what country	y or countries v	vere you a citizen or nationa	I during the tax year?	INDIA			
В	In what country	/ did you claim	residence for tax purposes	during the tax year?	United States		<u></u>	<u></u>
С	Reader for mixed of the transmission of transmission of the transmission of transmissin transmis transmis transmission of transmission of transmission					Yes	🔀 No	
D								
								⊠ No ⊠ No
Ζ.	0	· ·	,			• • •		
E	If you had a vis	sa on the last o	day of the tax year, enter y	our visa type. If you	didn't have a visa, enter	•		
F				us) or U.S. immigratio	n status?		🗌 Yes	🗙 No
•	-							
G	•					intervals		
						Mexico		
	Date entered	United States	Date departed United State		te entered United States	Date depa	arted United mm/dd/yy	d States
		uci, y y	nini/dd/yy		mini, dd/yy	· · · ·	mm, dd, yy	
н								
	2021		, 2022	, and 202	23 365	··	∇	
I							X Yes	∐ No
J	Are you filing a	return for a tru	st?	104			Yes	🗙 No
•	If "Yes," did the	e trust have a l	J.S. or foreign owner under	r the grantor trust rule	es, make a distribution or	loan to a	_	
V							∐ Yes	🗌 No 🔀 No
K	-						∐ Yes ∏ Yes	
L								
						,		, , ,
1.						imed the tre	eaty benefi	t, and the
		(a) Cou	ntry	(b) Tax treaty article			ount of exe n current ta	•
	(e) Total. Frite	r this amount o	n Form 1040-NR, line 1k, Dr	o not enter it anvwher	e else on line 1			
2.							Yes	No
			s pursuant to a Competent				Yes	🗙 No
	If "Yes," attach	a copy of the (Competent Authority determ	ination letter to your r	return.			

Check the applicable box if: Μ

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

2. You have made an election in a previous year that has not been revoked, 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