## 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	ssion Identification Number (SID)		•			
Taxpaye	r's name	Social securit	ocial security number			
TALE	PA SAI NALLAMOTHU	795-97-4438				
Spouse's	s name	Spouse's soci	r			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	vear you a	re au	thorizing	.)	
	vhole dollars only on lines 1 through 5.	<i>y y</i>				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	10	,347.	
	Total tax		2		0.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		<u>,361.</u>	
	Amount you want refunded to you		4	1	<u>,361.</u>	
	Amount you owe		5	torik koti	ırız)	
Part	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
to send for any Agent to payment authorize payment business taxes to personal	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmismy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U in initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions days prior to the payment (settlement) date. I also authorize the financial institutions involved in the particular confidential information necessary to answer inquiries and resolve issues related to the particular formation number (PIN) below is my signature for the income tax return (original or amended) I are finished.	ction of the trans. Treasury are cated in the tannot debit the the authorizates must be processing of ayment. I furtiles.	ansmised and its of an and its of an and its of an	ssion, (b) to designated paration so to this according revoke wed no late ectronic parking which will be so to the control of	he reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the	
Taxpa:	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate it	7 DINI 7	4 4	4 3 8	00 mv	
	ERO firm name	Ent		digits, but er all zeros	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 not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholow.					
Your si	ignature ▶ Date ▶					
Spous	e's PIN: check one box only					
	I authorize to enter or generate	my PIN			as my	
	ERO firm name	_	er five	digits, but	ao 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) I am notifyou are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methology.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2 5	7 1	
		Don't ente	er all ze	eros		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in a	accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o 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 Ja	n. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, , 2	0	See separate instructions.	
Your first name and middle initial		Last name Y				Your identifying number			
							(see instructions)		
TALPA SAI			NALL	AMOTHU			795-97-4438		
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
117 BEDFO	DRD	PL							
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZII	P code	
MORGANVII	LE					NJ	0,	7751	
Foreign country	/ nam	e	Foreign	n province/state/county		Foreign po	ostal code		
Filing		Single	aratelv (N	ΛFS) □ Qualifvi	ng surviving spouse (C	OSS)	☐ Estate	e 🗌 Trust	
Status	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent								
Check only		, ,			,				
one box.			. ,				<i>a</i> >		
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					(b) sell, exc		
Dependents				lintor out in a digital door				qualifies for (see inst.):	
(see instructions)				(2) Dependent's		1 1	tax credit	Credit for other	
(occ mendencine)	` <b></b>	(1) First name Last name		identifying number	(3) Relationship to you	ı Cillia		dependents	
If more than four							<u> </u>		
dependents, see							<u> </u>		
instructions and							<u> </u>		
check here	<u> </u>						Ц.,	10.045	
Income	1a	Total amount from Form(s) W-2, box	`	,			1a	10,347.	
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	e	Taxable dependent care benefits fro		*			1e		
Business	f	Employer-provided adoption benefit		*			1f		
Attach	g h	Wages from Form 8919, line 6 Other earned income (see instructio					1g 1h		
Form(s) W-2,	i	Reserved for future use	,				111		
1042-S, SSA-1042-S,	i	Reserved for future use					1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		.,		
and 8288-A here. Also	ĸ	line 1(e)			1k				
attach	z	Add lines 1a through 1h					1z	10,347.	
Form(s)	2a	Tax-exempt interest 2a	1	I	kable interest		2b		
1099-R if tax was	3a	Qualified dividends 3a	_		dinary dividends		3b		
withheld.	4a	IRA distributions 4a			kable amount		4b		
If you did not	5a	Pensions and annuities 5a	3	<b>b</b> Tax	kable 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	10,347.					
	10	Adjustments to income from Schedincome	10						
	11	Subtract line 10 from line 9. This is y	11	10,347.					
	12	Itemized deductions (from Schedu							
		deduction (see instructions)	ty <b>12</b>	13,850.					
	13a	Qualified business income deductio							
	b	Exemptions for estates and trusts o	nly (see i	instructions)					
	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 (2	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from	For	rm(s): <b>1</b> 88	14 <b>2</b> 🗌 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 depe	nde	ents 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	s, enter -0					22		0.
	23a	Tax on income not effectively connecte	d w	ith a U.S. trade o	r business from						
		Schedule NEC (Form 1040-NR), line 15				23a					
	b	Other taxes, including self-employmen	t ta	x, from Schedule	2 (Form 1040),						
		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 tota	l ta	<b>x</b>					24		0.
Payments	25	Federal income tax withheld from:									
<b>,</b>	а	Form(s) W-2				25a		L <b>,</b> 361.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c				<u> </u>			25d		1,361.
	е	Form(s) 8805							25e		
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments and amo							26		
	27	Reserved for future use				27					
	28	Additional child tax credit from Schedu				28					
	29	Credit for amount paid with Form 1040		,		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3 (Form 1040),				31					
	32	Add lines 28, 29, and 31. These are you					redits		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 3							33		1,361.
Refund	34	If line 33 is more than line 24, subtract							34		1,361.
riorana	35a	Amount of line 34 you want refunded t				-	=		35a		1,361.
Direct deposit?	b	Routing number   1   0   1   1   0					king 🗌				
See instructions.	d	Account number 5 1 8 0 1									
	e	If you want your refund check mailed t				es not	 shown on	page 1.			
	36	enter it here.  Amount of line 34 you want <b>applied to</b>	VOI	ur 2024 estimate	d tax	36	]				
Amount	37	Subtract line 33 from line 24. This is the					-				
You Owe	٠.	For details on how to pay, go to www.ii		-	see instructions .				37		
rou owe	38	Estimated tax penalty (see instructions	_			38	1				
Third		, , ,						es. Como	lete be	low	⊠ No
Party	Do you want to allow another person to discuss this return with the IRS? See instructions.   Yes. Complete									10 W.	<u> </u>
Designee	Designee's Phone Personal identifi name no. number (PIN)						ication				
	Under	penalties of perjury, I declare that I have exame they are true, correct, and complete. Declarat	nine	d this return and ac			d statement	s, and to th			
Sign		•									u an Identity
_	Your signature Date Your occupation						•	nter it here			
Here					IT ENGINEER	(NET	WORKING		inst.)	1, 01	
+	Phone	e no.		Email address		,		, (230			
			rer	's signature		Date	ļ	PTIN		Checl	k if:
Paid				RIYA RAM SAGAR	СПРТА ТАТ.Т.АМ		28/2024	P0208	2703	l —	elf-employed
Preparer			T 1/	TILL IVIL DAGAK	GOLIN INDUMN	102/	20/2024	Phone r			65-9522
Use Only		andress 245 DOONEY CT F	חם	OTINICMTOR NI				Firm's F			<u>05-9522</u> 71965

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 TALPA SAI NALLAMOTHU 795-97-4438 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)			
				(a) 1070	( <b>b)</b> 1370	(C) 30 70	%	%
1	Dividends and divide	end equivalents:						
а	Dividends paid by U.	S. corporations	1a					
b	Dividends paid by fo	reign corporations	1b					
С	Dividend equivalent p	ayments received with respect to section 871(m) transactions	1c					
2	Interest:							
а	Mortgage		2a					
b		orations	2b					
С			2c					
3		atents, trademarks, etc.)	3					
4		copyright royalties	4					
5		rights, recording, publishing, etc.)	5					
6		e and natural resources royalties	6					
7	Pensions and annuiti	es	7					
8		îts	8					
9	= = = = = = = = = = = = = = = = = = = =	e 18 below	9					
10	Gambling—Resident	s of Canada only. Enter net income in column (c).						
а	Winnings							
b	Losses	<u> </u>	10c					
11	Note: Enter winnings		11					
12	Other (specify):							
			12					
13	Add lines 1a through	` '	13					
14		•	14					
15	Tax on income not e	ffectively connected with a U.S. trade or business. Add column	ıs (a) th	rough (d) of line 14	. Enter the total here	and on Form 1040-	NR, line 23a   <b>15</b>	
		Capital Gains and Losses Fr	rom S	Sales or Excha	nges of Propert	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acquir 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).
busines	ely connected with a U.S. ss. Do not include a gain							
or loss on disposing of a U.S. real property interest; report these								
gains a	nd losses on Schedule D							
(Form 1	property sales or							
exchan	ges that are effectively							
on Sche	ted with a U.S. business edule D (Form 1040),	17 Add columns (f) and (g) of line 16				<u>17</u>		
Form 4	797, or both.	18 Capital gain. Combine columns (f) and (g) of line 17.	Enter	the net gain here	e and on line 9 abo	ove. It 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.

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

vame	snown on Form 1040-NR			Your identifying								
TAI	PA SAI NALLAMOTHU			795-97-44								
Α	Of what country or countries were you a citizen or natio	onal during the tax year	r? 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	l permanent resident) o	of the United States? .		☐ Yes	⊠ No						
D	Were you ever:											
1	. A U.S. citizen?	Yes	⊠ No									
2	. A green card holder (lawful permanent resident) of the L		Yes	⊠ No								
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter											
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?											
•	If you answered "Yes," indicate the date and nature of the change:											
G	List all dates you entered and left the United States dur	List all dates you entered and left the United States during 2023. See instructions.										
_	Note: If you're a resident of Canada or Mexico AND co			ent intervals								
	check the box for Canada or Mexico and skip to item			☐ Mexico								
	Date entered United States		Date entered United State		rtad I Inita	d States						
	mm/dd/yy mm/dd/yy	aics	mm/dd/yy		nm/dd/yy	d Otatos						
н	Give number of days (including vacation, nonworkdays, a	 nd partial davs) vou we	re present in the United S	States during:								
•		Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during:  2021, 2022, and 2023365										
ı	Did you file a U.S. income tax return for any prior year?	, and 2		···	Yes	⊠ No						
•	If "Yes," give the latest year and form number you filed:											
J	Are you filing a return for a trust?				Yes	⊠ No						
•	If "Yes," did the trust have a U.S. or foreign owner und											
	U.S. person, or receive a contribution from a U.S. person				☐ Yes	□No						
K					☐ Yes	⊠ No						
		Did you receive total compensation of \$250,000 or more during the tax year?										
L	Income Exempt From Tax—If you are claiming exempt		•			□ <b>No</b> L country.						
_	complete (1) through (3) below. See Pub. 901 for more in			an ilouty will	a rororgi	, country,						
1	Enter the name of the country, the applicable tax treaty a			claimed the tre	atv benefi	t. and the						
-	amount of exempt income in the columns below. Attach				,	.,						
	(a) Country	(b) Tax treaty article	e (c) Number of month	ıs (d) Am	nount of exempt							
	(4)	(,	claimed in prior tax ye		n current t							
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1											
2												
3												
	If "Yes," attach a copy of the Competent Authority dete	ermination letter to you	r return.									
М	Check the applicable box if:											
1	This is the first year you are making an election to treat	income from real prop	perty located in the Unite	ed States as ef	fectively c	onnected						
	with a U.S. trade or business under section 871(d). See	instructions				🗆						
2	. You have made an election in a previous year that ha											
	States as effectively connected with a U.S. trade or bus	siness under section 8	71(d). See instructions .			🗆						