## 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

	5		_				
Submis	sion Identification Number (SID)						
Taxpayer	's name	Social security number					
SAI	PHANIDHAR PASUPULETI	750-60-9936					
Spouse's	name	Spouse's soo	ial sec	urity number	r		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re au	thorizing.	)		
	rhole dollars only on lines 1 through 5.	<i>y y</i>			<del>,</del>		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 .	Adjusted gross income		1	1	,781.		
	Total tax		2		0.		
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3				
	Amount you want refunded to you		4				
	Amount you owe		5		0.		
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and k enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)						
return (o to send for any o Agent to paymen authoriz paymen business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate to I, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I and the payment withdrawal Consent.	ter, or electrication of the ties. Treasury a cated in the ties to debit the authorizests must be processing or ayment. I fur	onic reransmised ax prepartion. The receiff the eland and the receifther acceiments.	turn origina ssion, (b) the designated paration soft to this acco To revoke ( ved no late ectronic par eknowledge	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
	ic Funds Withdrawal Consent. ver's PIN: check one box only						
X	I authorize GLOBAL TAXES LLC to enter or generate n	ny PIN 0	9 9	9 3 6	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	asiny		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.						
Your si	gnature ▶ Date ▶						
Spouse	e's PIN: check one box only						
	I authorize to enter or generate n	nv PIN			as my		
	ERO firm name	En		digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.						
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 Don't ent	6 0	8 2 7	1		
		23.1.0110	wii 21				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta: ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Inc.	tting this retu	urn 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 Jan. 1-Dec. 31, 2023, or other tax year beginn				ning, 2023, ending, 20					See separate nstructions.	
Your first name and middle initial			Last name Y					Your identifying number (see instructions)		
								750-60-9936		
SAI PHANIDHAR Home address (number and street). If you have a P.O. box,				PULETI			/50-	-60-5	Apt. no.	
802 RAILE	•	, , ,	, see 1115	tructions.					Apt. 110.	
		ffice. If you have a foreign address, als	o comp	lete enaces helow		State		ZIP co	nde	
• • • •		nice. If you have a foreign address, as	so comp	iete spaces below.				626		
BEARDSTOW Foreign country		<b>a</b>	Foreign	n province/state/county		IL Foreign	nostal co		10	
r oreign country	riaiii	C	l oreigi	r province/state/county		rorcigiri	303141 001	uc		
Filing Status		Single			ng surviving spouse (	,		tate	☐ Trust	
Check only one box.		you checked the QSS box, enter the o	child's na	ame if the qualifying pers	son is a child but not	your depe	endent: 			
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					r (b) sell, 			
<b>Dependents</b>	;					(4) Ch	eck the box	k if qual	lifies for (see inst.):	
(see instructions):	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Chil	d tax cred	it C	Credit for other dependents	
		(1) That hame Last hame		identifying namber	(b) Helationship to yo	,,,			dependents	
If more than four										
dependents, see instructions and							H			
check here							$\overline{\Box}$		$ \ddot{\Box}$	
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	Т	1,781.	
Effectively	b	Household employee wages not rep	`	,						
Connected	С	Tip income not reported on line 1a (s		, ,						
With U.S.	d	Medicaid waiver payments not report		*						
Trade or	е	Taxable dependent care benefits fro		, , ,	·					
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 1f			
	g	Wages from Form 8919, line 6	. 1g							
Attach Form(s) W-2,	h	Other earned income (see instruction	. 1h							
1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		, , , , , , , , , , , , , , , , , , , ,	·					
attach	Z	Add lines 1a through 1h					. 1z		1,781.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	1	<b>b</b> Tax	able interest		. 2b			
tax was	3a	Qualified dividends 3a	1	<b>b</b> Ord	linary dividends		. 3b			
withheld.	4a	IRA distributions 4a			able amount					
If you did not	5a	Pensions and annuities 5a	1	<b>b</b> Tax	able amount					
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		+	1 001					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8			1,781.					
	10	Adjustments to income from Sched income	. 10							
	11	Subtract line 10 from line 9. This is y							1,781.	
	12	<b>Itemized deductions</b> (from Schedu deduction (see instructions)			13,850.					
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts or								
	С	Add lines 13a and 13b					<b>—</b>			
	14						-		13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b> :	xable income		. 15		0.	

Form 1040-NR (2	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from	n For	rm(s): <b>1</b>	314 <b>2</b> [	497	2 3	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 dependents from Schedule 8812 (Form 1040)									
	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 of	r less	s, enter -0						22	0.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line 1		vith a U.S. trade o			23a				
	b	Other taxes, including self-employme line 21	nt ta	x, from Schedul	e 2 (Form 1	040),	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 ta	<b>x</b>						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	ount	applied from 20	22 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from Sched					28				
	29	Credit for amount paid with Form 104					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040)					31				
	32	Add lines 28, 29, and 31. These are year	-				ble cr	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33	
Refund	34	If line 33 is more than line 24, subtract								34	
riorana	35a	Amount of line 34 you want refunded					-	=		35a	
Direct deposit?	b	Routing number XXXXX			<b>c</b> Type:	_		_	Savings		
See instructions.	d	Account number X X X X							3.		
	е	If you want your refund check mailed							page 1.		
		enter it here.									
	36	Amount of line 34 you want applied t					36				
Amount	37	Subtract line 33 from line 24. This is t									
You Owe		For details on how to pay, go to www	.irs.g	gov/Payments or	see instruct	tions .				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.								lete be	low. 🗵 No	
Party Designee	Designee's name						nal identi				
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to t belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which										
Sign	Vour	signature		Date	Your occu	nation			l If th	e IRS s	ent you an Identity
Here	Toui	signature		Date	STUDEN				Pro		PIN, enter it here
İ	Phon	e no.		Email address	1				1,		
Deid		•	oarer	's signature			Date		PTIN		Check if:
Paid	•	'		RIYA RAM SAGAE	R GUPTA TZ	LLAM	03/0	7/2024	P0208	2703	Self-employed
Preparer	Firm's name CLODAL TAVES LIC										
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E										

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

SAI PHANIDHAR PASUPULETI 750-60-9936 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 3 4 Motion picture or TV copyright royalties . . . . . . . . . . . . . . . 5 Real property income and natural resources royalties 6 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 (f) LOSS 16 (a) Kind of property and description (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 subtract (d) from (e). descriptive details not shown below) 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 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.

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

Name sl	nown on Form 1040-NR				Your identifying	number	_			
SAI	PHANIDHAR PASUPULET:	[			750-60-99	36				
Α	Of what country or countries were you a citizen or national during the tax year? 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				D					
D	Were you ever:									
1.	A U.S. citizen?		☐ Yes ⊠ No	o						
2.	A green card holder (lawful per			☐ Yes ⊠ No	o					
	If you answer "Yes" to (1) or (2	), see Pub. 519, chapter 4,	for expatriation rules	s 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. $F1$									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	eft the United States durin	g 2023. See instruct	ions.						
	Note: If you're a resident of C				ent intervals,					
	check the box for Canada or	Mexico and skip to item I	<u>1.</u> <u>.</u>	🗌 Canada	☐ Mexico					
	Date entered United States	Date departed United Stat	es C	Date entered United State		rted United States	s			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	nm/dd/yy				
							$\Box$			
							_			
							_			
							$\Box$			
Н	Give number of days (including									
	2021	, 2022	, and 2	2023 365	··	□ v	_			
ı	Did you file a U.S. income tax If "Yes," give the latest year ar	d form number you filed:				☐ Yes ⊠ No				
J	Are you filing a return for a trus	st?				☐ Yes ⊠ No	)			
	If "Yes," did the trust have a l									
	U.S. person, or receive a contr					☐ Yes ☐ No				
K	Did you receive total compens					☐ Yes ⊠ No				
	If "Yes," did you use an alterna					Yes No				
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign countr	ry,			
4	complete (1) through (3) below. See Pub. 901 for more information on tax treaties.									
٠.	1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.									
	(a) Country (b) Tax treaty article (c) Number of months (d) Amount of ex									
	(a) 00a	Titl y	(b) Tax treaty article	claimed in prior tax ye		current tax year				
						<u> </u>	_			
							_			
	(e) Total. Enter this amount of	n Form 1040-NR, line 1k. D	o not enter it anywh	ere else on line 1						
	Were you subject to tax in a fo					Yes No	-			
3.	Are you claiming treaty benefit	•	•			☐ Yes ⊠ No	)			
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to you	r return.						
Μ.	Check the applicable box if:									
1.	This is the first year you are may with a U.S. trade or business u						ed			
2.	You have made an election in	a previous year that has	not been revoked,	to treat income from re	eal property loc	ated in the Unite	ed			
	States as effectively connected						<u>그</u>			