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

Submission Identification Number (SID)	
Taxpayer's name	Social security number
VENKATA SARAT SAIKRISHNA ADUSUMALLI	832-42-9886
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Endin	ng December 31, 2023 (Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	3,
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3	, and 5 blank.
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and For	rm(s) 1099
4 Amount you want refunded to you	
5 Amount you owe	
	norization (Be sure you get and keep a copy of your return)
return (original or amended) I am now authorizing. I consent to allow to send my return to the IRS and to receive from the IRS (a) an acking for any delay in processing the return or refund, and (c) the date of a Agent to initiate an ACH electronic funds withdrawal (direct debit) expayment of my federal taxes owed on this return and/or a payment of authorization is to remain in full force and effect until I notify the Lapayment, I must contact the U.S. Treasury Financial Agent at 1-tousiness days prior to the payment (settlement) date. I also authorizates to receive confidential information necessary to answer inquipersonal identification number (PIN) below is my signature for the in Electronic Funds Withdrawal Consent.	or declare that the amounts in Part I above are the amounts from the income tax or my intermediate service provider, transmitter, or electronic return originator (ERO) nowledgement of receipt or reason for rejection of the transmission, (b) the reason any refund. If applicable, I authorize the U.S. Treasury and its designated Financial ritry to the financial institution account indicated in the tax preparation software for of estimated tax, and the financial institution to debit the entry to this account. This J.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a 388-353-4537. Payment cancellation requests must be received no later than 2 are the financial institutions involved in the processing of the electronic payment of uiries and resolve issues related to the payment. I further acknowledge that the income tax return (original or amended) I am now authorizing and, if applicable, my
Taxpayer's PIN: check one box only	2 9 8 8 6
X I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amen	to enter or generate my PIN Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income to	ax return (original or amended) I am now authorizing. Check this box only filed using the Practitioner PIN method. The ERO must complete Part III
Your signature ▶	Date ▶
Spouse's PIN: check one box only	
I authorize	to enter or generate my PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amen	ded) I am now authorizing. don't enter all zeros
	ax return (original or amended) I am now authorizing. Check this box only filed using the Practitioner PIN method. The ERO must complete Part III
Spouse's signature ▶	Date ►
	od Returns Only—continue below
Part III Certification and Authentication — Pract	itioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your	five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
authorized to file for tax year indicated above for the taxpayer(s) in	ture for the electronic individual income tax return (original or amended) I am now indicated above. I confirm that I am submitting this return in accordance with the book for Authorized IRS e-file Providers of Individual Income Tax Returns.
ERO's signature ▶	Date ▶
	This Form — See Instructions

Don't Submit This Form to the IRS Unless Requested To Do 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	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	:	2023,	ending	,	20		instructions.	
our first name and middle initial				Last name Yo					our identifying number see instructions)		
VENKATA S	SARA	T SAIKRISHNA	ADUS	UMALLI				832-	-42-	9886	
Home address (numk	per and street). If you have a P.O. box	, see ins	tructions.						Apt. no.	
106 WARD	ST									C	
City, town, or po	ost of	fice. If you have a foreign address, al	so comp	lete spaces belov	/ .		State		ZIP c	ode	
ROXBURY C	ROS	SING					MA		021	.20	
Foreign country	name	е	Foreigr	n province/state/o	ounty		Foreign _I	oostal co	de		
Filing Status	☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende									☐ Trust	
Check only one box.											
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a t						r (b) sell, 		ange, or X No	
Dependents (see instructions): (1) First name		(1) First name Last name		(2) Dependent's identifying number		(3) Relationship to yo	Chil	eck the bo	ĺ	alifies for (see inst.): Credit for other dependents	
If more than four											
dependents, see											
instructions and check here											
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)				. 1a	T^{L}	34,309.	
Effectively	b	Household employee wages not rep	•	,				. 1b		31/307.	
Connected											
With U.S.	d	c Tip income not reported on line 1a (see instructions)									
Trade or	е	Taxable dependent care benefits fro		` , ` `		,		. 1e			
Business	f	Employer-provided adoption benefit		•				. 1f			
	g	Wages from Form 8919, line 6						. 1g			
Attach Form(s) W-2,	h	Other earned income (see instructio	ns) .					. 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)		•)-NR), i 	tem L, 1k					
attach	z	Add lines 1a through 1h						. 1z		34,309.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	- 1		b Tax	able interest		. 2b			
tax was	3a	Qualified dividends 3a	a		b Ord	linary dividends		. 3b			
withheld.	4a	IRA distributions 4a	3		b Tax	able amount		. 4b			
If you did not	5a	Pensions and annuities 5a	3		b Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use						. 6			
instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if require	ed. If no	ot required, check he	re [7			
	8	Additional income from Schedule 1	(Form 10	140), line 10 .				. 8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effect	ively c	onnected income		. 9		34,309.	
	10	Adjustments to income from Schedincome	,	, .							
	11	Subtract line 10 from line 9. This is y	our adju	sted gross inco	me			. 11		34,309.	
	12									13,850.	
	13a									-,	
	b										
	c	Add lines 13a and 13b	• .	•				. 130	,		
	14									13,850.	
	15	Subtract line 14 from line 11. If zero								20,459.	

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	314 2	4972	2 3			16	2,237.
Credits	17	Amount from Schedule 2 (Form 10	40), line	3						17	0.
	18	Add lines 16 and 17								18	2,237.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (F	orm 104	0) .			19	
	20	Amount from Schedule 3 (Form 10	140), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zer	o or less	s, enter -0			٠.			22	2,237.
	23a	Tax on income not effectively conr Schedule NEC (Form 1040-NR), lin					23a				
	b	Other taxes, including self-employ line 21		•	•	, ·	23b				
	С	Transportation tax (see instruction	s)			[23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your	total tax	x						24	2,237.
Payments	25	Federal income tax withheld from:									
-	а	Form(s) W-2				[25a		2,563.		
	b	Form(s) 1099				[25b				
	С	Other forms (see instructions) .				[25c				
	d	Add lines 25a through 25c								25d	2,563.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and	amount	applied from 20	22 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from Sci	hedule 8	812 (Form 1040)		28				
	29	Credit for amount paid with Form				- t	29				
	30	Reserved for future use					30			4	
	31	Amount from Schedule 3 (Form 10	, .				31				
	Add lines 28, 29, and 31. These are your total other payments and refundable credits									32	
	33									33	2,563.
Refund	34	If line 33 is more than line 24, subt					•	-		34	326.
	35a	Amount of line 34 you want refund				_		_		35a	326.
Direct deposit? See instructions.								Savings			
occ mondetions.	d Account number / / / 1 5 / 5 1 1 2										
	е	If you want your refund check mai							. •		
		enter it here.				T					
	36	Amount of line 34 you want applie					36				
Amount	37	Subtract line 33 from line 24. This		-		ctions				27	
You Owe	38	For details on how to pay, go to www.irs.gov/Payments or see instructions								37	
Third						o inetruo			as Comp	lata ha	low. 🗵 No
Party	Do you want to allow another person to discuss this return with the IRS? See instructions. Personal identification.									iow.	
Designee	Designee's Phone Personal identifiname no. Personal identifiname no.								ication		
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has										
Sign								If th	e IRS s	ent you an Identity	
Here		3							Prot	ection	PIN, enter it here
								(see	inst.)		
	Phone	•		Email address		1			T =		
Paid	Prepa	rer's name	reparer'	's signature			Date		PTIN		Check if:
Preparer				PRIYA RAM	SAGAR G	UPTA	04/0	3/2024	P0208	2703	Self-employed
Use Only		name GLOBAL TAXES LI							Phone n		78)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN										

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

VENKATA SARAT SAIKRISHNA ADUSUMALLI 832-42-9886 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 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. Department of the Treasury Internal Revenue Service Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name sh	nown on Form 1040-NR	Your identifying number									
VENK	ATA SARAT SAIKRISHN	832-42-9886									
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		☐ Yes	⊠ No							
D	Were you ever:										
1.	A U.S. citizen?		☐ Yes	⊠ No							
2.	A green card holder (lawful permanent resident) of the United States?										
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules 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	left the United States during									
	Note: If you're a resident of C				ent intervals,						
	check the box for Canada or	Mexico and skip to item H	<u>. </u>	\square Canada	Mexico						
	Date entered United States	Date departed United State	es	Date entered United State			d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy					
Н	Give number of days (including 2021	, 2022	, an	d 2023 365	·	_	_				
ı	Did you file a U.S. income tax					⊠ Yes	☐ No				
_	If "Yes," give the latest year ar						.				
J	Are you filing a return for a trust If "Yes," did the trust have a l	J.S. or foreign owner unde	r the grantor trus	t rules, make a distributior	or loan to a	∐ Yes	⊠ No				
	U.S. person, or receive a conti					∐ 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 you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.										
1.	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) Cou	ntry	(b) Tax treaty art	icle (c) Number of month claimed in prior tax ye	','						
	(e) Total. Enter this amount of	n Form 1040-NR. line 1k. D	o not enter it anv	where else on line 1							
2.	Were you subject to tax in a fo		-			Yes	☐ No				
	Are you claiming treaty benefit					☐ Yes	⊠ No				
	If "Yes," attach a copy of the (-		• •						
М	Check the applicable box if:	, , , , , , , , , , , , , , , , , , , ,	· - y								
	This is the first year you are mouth a U.S. trade or business u										
2.	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										