## 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 Ident	tification Number (SID)					
Taxpayer's name	Social securi	ty numb	per			
GAYATRI RAT	TNAMALA BELAGAM	090-53-2857				
Spouse's name	Spouse's soo	ocial security number				
Part I Tax	Return Information — Tax Year Ending December 31, 2023 (Enter	vear vou a	re aut	thorizina )		
	rs only on lines 1 through 5.	year you a	ie aui	inonzing.)		
	-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	gross income		1 1	8,68	31.	
-			2	•	0.	
3 Federal in	come tax withheld from Form(s) W-2 and Form(s) 1099		3	1,70	)3.	
4 Amount y	ou want refunded to you		4	1,70		
5 Amount ye			5			
Part II Tax	payer Declaration and Signature Authorization (Be sure you get and k	еер а сор	y of y	our return)		
return (original or a to send my return to for any delay in pro Agent to initiate an payment of my fede authorization is to payment, I must of business days prior taxes to receive or	I belief, it is true, correct, and complete. I further declare that the amounts in Part I above mended) I am now authorizing. I consent to allow my intermediate service provider, transmit to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject cessing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiceral taxes owed on this return and/or a payment of estimated tax, and the financial institution remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ontact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required to the payment (settlement) date. I also authorize the financial institutions involved in the particle on the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the payment (PIN) below is my signature for the income tax return (original or amended) I amilitations in the payment of the p	ter, or electro- ction of the trace. Treasury a cated in the trace to debit the the authorizates must be processing of ayment. I furnitation of the trace trace trace to the trace trace trace to the trace trace	onic retransmised its cax preparently to a cax preparently to attend to a cax preceived in the cax preceived in th	curn originator (I ssion, (b) the re designated Fina paration softwar to this account. To revoke (cance wed no later the ectronic payme knowledge tha	ERO) ason ancial re for This cel) a ann 2 ent of	
	check one box only					
	ze GLOBAL TAXES LLC to enter or generate n	3 DINI	2 8	3 5 7	my	
_	e on the income tax return (original or amended) I am now authorizing.	En		digits, but r all zeros	iiiy	
☐ I will ent	ter my PIN as my signature on the income tax return (original or amended) I am not be entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method					
Your signature ▶	Date ▶					
Spausa's DIN: a	heck one box only					
authori	-	av DINI			m	
	ERO firm name	_	ter five	digits, but	my	
signatur	e on the income tax return (original or amended) I am now authorizing.			r all zeros		
☐ I will ent	ter my PIN as my signature on the income tax return (original or amended) I am no re entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metho		_		_	
Spouse's signatu	rre ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part III Cer	tification and Authentication — Practitioner 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 Don't ent	6 0 er all ze	8 2 7 1 eros		
authorized to file for	nove numeric entry is my PIN, which is my signature for the electronic individual income taxor tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit a Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Indiana.	tting this retu	ırn in a	accordance with		
ERO's signature	<b>D</b> ate ▶					
	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 Jar	n. 1–D	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	0	See separate instructions.
Your first name	and r	niddle initial	Last name Y			Your identifying number		
							(see instru	ctions)
GAYATRI E	RATN	IAMALA	BELA	GAM			090-5	3-2857
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
3700 CAPI	TAL	CIRCLE S.E						
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.	:	State	ZI	P code
TALLAHASS	SEE					FL	3	2311
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign po	ostal code	
Filing		Single Married filing sepa	arately (N	ΛΕS) □ Qualifyir	ng surviving spouse (C	)\$\$)	☐ Estate	e 🗌 Trust
Status		you checked the QSS box, enter the			· · · ·	,		o
Check only		, 04 00004 11.0 400 20, 00. 11.0	oa o	and it are qualifying poin	,	ou. dopo.		
one box.								
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a					(b) sell, exc	
<b>Dependents</b>				(0) 5		(4) Ched	ck the box if	qualifies for (see inst.):
(see instructions):	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to you	Child	tax credit	Credit for other dependents
		(i) i i i i i i i i i i i i i i i i i i		, 0	(-)		П	
If more than four							<del>i</del>	
dependents, see instructions and								
check here								
Income	1a	Total amount from Form(s) W-2, box	x 1 (see i	nstructions)			1a	8,681.
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2			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 from Form 2441, line 26							
Business	f	Employer-provided adoption benefit	ts from F	orm 8839, line 29 .			1f	
	g	Wages from Form 8919, line 6					1g	
Attach								
1042-S,	i	Reserved for future use			<b>1</b> i			
SSA-1042-S, RRB-1042-S,	j	Reserved for future use					1j	
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		, ,	tem L, <b>1k</b>			
attach	z	Add lines 1a through 1h					1z	8,681.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	а	<b>b</b> Tax	able interest		2b	
tax was	3a	Qualified dividends 3a	а	<b>b</b> Ord	linary dividends		3b	
withheld.	4a	IRA distributions 4a			able amount		4b	
If you did not	5a	Pensions and annuities 5	_		able amount		5b	
get a Form W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	•		•			
	8	Additional income from Schedule 1					8	0.601
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and					9	8,681.
	10	Adjustments to income from Sched income					10	
	11	Subtract line 10 from line 9. This is y	your <b>adj</b> u	isted gross income			11	8,681.
	12	<b>Itemized deductions</b> (from Schedudeduction (see instructions)		13,850.				
	13a	Qualified business income deductio						
b Exemptions for estates and trusts only (see instructions)								
	С	Add lines 13a and 13b					13c	
	14	Add lines 12 and 13c					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 For	rm(s): <b>1</b>	314 <b>2</b> [	497	2 3			16		0.
Credits	17	Amount from Schedule 2 (Form 1040), line							17		0.
	18	Add lines 16 and 17							18		0.
	19	Child tax credit or credit for other depende	ents from Schedi	ule 8812 (Fo	orm 104	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 connected w	rith a U.S. trade o	or business	from						
		Schedule NEC (Form 1040-NR), line 15				23a					
	b	Other taxes, including self-employment ta	x, from Schedule	e 2 (Form 1	040),						
		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 ta	<b>x</b>						24		0.
Payments	25	Federal income tax withheld from:									
•	а	Form(s) W-2				25a		1,703.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c							25d		1,703.
	е	Form(s) 8805							25e		_
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments and amount							26		
	27	Reserved for future use				27					
	28	Additional child tax credit from Schedule 8	8812 (Form 1040)	)		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				31					
	32	Add lines 28, 29, and 31. These are your to	otal other paym	ents and re	efunda	ble cr	edits .		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T	hese are your <b>to</b>	tal payme	nts .				33		1,703.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33.	This is the	amoun	t you <b>c</b>	verpaid		34		1,703.
	35a	Amount of line 34 you want refunded to y	ou. If Form 8888	s is attached	d, chec	k here		🗆	35a		1,703.
Direct deposit?	b	Routing number 0 2 1 2 0 2	3 3 7	<b>c</b> Type:	: <b>X</b>	Check	ing $\square$	Savings			
See instructions.	d	Account number 8 9 7 1 7 6	5 6 3								
	е	If you want your refund check mailed to a	n address outsid	le the Unite	d State	s not	 shown on	page 1,			
		enter it here.									
	36										
Amount	37	Subtract line 33 from line 24. This is the ar	mount you owe.								
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or	see instruc	tions .				37		
	38 Estimated tax penalty (see instructions)										
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.							lete bel	ow.	⊠ No	
Party	Designee's Phone Personal identif					cation					
Designee	name nonumber (PIN)										
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Sign	Your	signature	Date	Your occu	pation			If th	e IRS s	ent you	an Identity
Here		5.9.14.4.0			.pa					•	nter it here
- 10.0	MANAGER OF DATA ANALYTICS (see					inst.)					
	Phone	e no.	Email address								
Paid	Prepa	rer's name Preparer	's signature			Date	<del></del>	PTIN		Check	k if:
Preparer	SYAM PRIYA RAM SAGAR GUPTA   SYAM PRIYA RAM SAGAR GUPTA   04/15/2024   P020				P0208	2703	☐ Se	elf-employed			
- 1	Firm's name GLOBAL TAXES LLC Phone n							10. (6	78)9	65-9522	
Use Only	Firm's address 2/5 DOONEY OF E DDINGWICK NT 09916 Firm's FI							INI Q	4-31	71965	

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

GAYATRI RATNAMALA BELAGAM 090-53-2857 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)

Department of the Treasury

Internal Revenue Service

### **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

Name sh	nown on Form 1040-NR				Your identifying	number					
GAYA	TRI RATNAMALA BELAG	090-53-2857									
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	green card holder (lawful p	ermanent residen	t) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1.	A U.S. citizen?					☐ Yes	⊠ No				
2.	A green card holder (lawful pe		☐ Yes	⊠ No							
	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 yearF1										
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 durin	g 2023. See instru	ictions.							
	Note: If you're a resident of C										
	check the box for Canada or	r <b>Mexico</b> and skip to item F	1	Canada Mexico							
	Date entered United States	Date departed United State	es	Date entered United State		arted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy					
			<u> </u>								
н	Give number of days (including	vacation nanwarkdaya and	d portiol days) you	ware present in the United	Ctataa durinau						
	2021	, 2022	, an	d 2023 365	·						
I	Did you file a U.S. income tax					⊠ Yes	☐ No				
	If "Yes," give the latest year ar	nd form number you filed:		1040NR							
J	Are you filing a return for a true					<b>∐</b> Yes	⊠ No				
	If "Yes," did the trust have a U.S. person, or receive a contraction.										
V						☐ Yes ☐ Yes	□ No ⊠ No				
K	Did you receive total compens										
L	If "Yes," did you use an alternative method to determine the source of this compensation?										
_	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.										
	<b>(a)</b> Cou	ntry	(b) Tax treaty art	(c) Number of month claimed in prior tax ye		ount of exe					
	(e) Total. Enter this amount o	n Form 1040-ND line 11/ D	o not ontor it and	whore else on line 1							
2.	Were you subject to tax in a fo		•			Yes	□No				
	Are you claiming treaty benefit					☐ Yes	□ No No				
٥.	If "Yes," attach a copy of the (	•	•			163	<u> </u>				
М	Check the applicable box if:	Joinpotent Additiontly determ	imation letter to y	oai rotuiri.							
	This is the first year you are m						onnected				
^	with a U.S. trade or business u	, ,									
2.	You have made an election in States as effectively connected										