Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social security number

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpaver's name

JANAKIRAMA PAVANKUMAR GORIPARTHI	693-77-8065
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are authorizing.)
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 10,370.
2 Total tax	2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 164.
4 Amount you want refunded to you	4 164.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy of your 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

GLOBAL TAXES LLC to enter o	r generate my PIN

ļ	7 Ent	8 er fiv	0 re di	6 aits	5 but	as				
	Enter five digits, but don't enter all zeros									

my

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

X 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 signature	► Da	ate 🕨					 				
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III Certific	ication and Authentication – Practitioner PIN Method Only										
ERO's EFIN/PIN. En	nter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7	1	

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 🕨	
-	Must Retain This Form — See Instructions t This Form to the IRS Unless Requested To Do So	
For Denominary Deduction Act Nation and your		Earm 8879 (Bay, 01 2021)

1040	_	VR Department of the Treasury-Inter U.S. Nonresident Al	nal Revenue Service	ax Return	2023				
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year beginn	ing	, 2023, e	ending		, 20		e separate structions.
Your first name	and	middle initial	Last name				Your i		
							(see in	structior	ıs)
JANAKIRAM	ΙA	PAVANKUMAR	GORIPARTHI				693	-77-8	065
Home address (nun	ber and street). If you have a P.O. box	, see instructions.						Apt. no.
City, town, or po	ost o	ffice. If you have a foreign address, al	so complete spaces	s below.		State		ZIP co	de
						MI			1
Foreign country	nar	ne	Foreign province/s	state/county		Foreign	postal co	ode	
	1								
-		Single 🛛 Married filing sepa	arately (MFS)	Qualifying	g surviving spous	e (QSS)	E	state	Trust
	lt			ualifying perso	on is a child but n	ot your dep	endent:		
,		·	·					_	
	۸+	vou time during 2022 did your (a) race	ive (as a reward aw	ard or pourpo	nt for proporty or		or (b) coll	oveben	
Digital Assets	oth	erwise dispose of a digital asset (or a f	inancial interest in a	a digital asset)	? (See instruction:	Services), (S.)			Yes 🔀 No
Dependents					,				
(see instructions):			31, 2023, or other tax year beginning 2023, ending 20 See sepainstructions instructions instructins instructins instructins instructions instructions instructions	redit for other					
For the year Jan. 1–Dec. 31, 2023, or of Your first name and middle initial JANAKIRAMA PAVANKUMAR Home address (number and street). If 38192 SARATOGA City, town, or post office. If you have at FARMINGTON Foreign country name Filing Status Check only One box. Digital Assets At any time during 20 otherwise dispose of Dependents (see instructions): (1) First name If more than four dependents, see instructions and check here Income 1a Total amount free Effectively b Household empt Connected c Tip income not With U.S. d g Wages from Foi h Other earned in 1042-S, j and 828-A k here. Also z attach z Form(s) 2a 1099-R if	(1) First name Last name	identifyir	ng number	(3) Relationship to	you			dependents	
If more than four									
dependents, see									
_									
	10	Total amount from Form(a) W(2, bay	(1 (aggingtructions)						10,370.
			,					-	10,370.
			.,		,				
	f								
	g						. 19	3	
	h						. 11	ו	
•••	i	Reserved for future use			. 1i				
,	j	Reserved for future use					. 1	i	
	k	Total income exempt by a treaty from	n Schedule OI (Forn	n 1040-NR), ite	em L,				
					. 1k				10 000
		_		1					10,370.
		· ·						-	
For the year Jan. 1–Dec. 3 Your first name and middle JANAKIRAMA PAVA Home address (number ar 38192 SARATOGA City, town, or post office. If FARMINGTON Foreign country name Filing Is sing Status If you cl Check only							-		
get a Form									
	7								
	8	Additional income from Schedule 1	(Form 1040), line 10				. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is your total	effectively co	nnected income		. 9		10,370.
	10	-			•	-)	
	11	Subtract line 10 from line 9. This is y	our adjusted gross	s income .			. 1		10,370.
	12							2	13,850.
	13a								
38192 SAJ City, town, or p FARMINGTO Foreign countr Filing Status Check only one box. Digital Assets Dependents (see instructions) If more than fou dependents, see instructions and check here I Income Effectively Connected With U.S. Trade or Business Attach Form(s) W-2, 1042-S, SSA-1042-S, SSA-1042-S, SSA-1042-S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see	b	Exemptions for estates and trusts of	nly (see instructions))	. 13b				
	С	Add lines 13a and 13b					. 13	c	
									13,850.
	Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 Total amount from Form(s) W-2,	_	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(s): 1 8814 2 4972 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)	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, enter -0	22	0.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15		
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),	-	
		line 21	_	
	С	Transportation tax (see instructions)	_	
	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	_	
	b	Form(s) 1099	_	
	С	Other forms (see instructions)	_	
	d	Add lines 25a through 25c	25d	164.
	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 2022 return	26	
	27	Reserved for future use .		
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28	_	
	29	Credit for amount paid with Form 1040-C	_	
	30	Reserved for future use .		
	31	Amount from Schedule 3 (Form 1040), line 15		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33	164.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	164.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	164.
Direct deposit?	b	Routing number 1 1 0 0 6 1 4 c Type: C Checking Savings		
See instructions.	d	Account number 7 9 3 1 2 2 3 9 8		
	е	If you want your refund check mailed to an address outside the United States not shown on page 1,		
	26	enter it here Amount of line 34 you want applied to your 2024 estimated tax 36		
A	36 37	Subtract line 33 from line 24. This is the amount you owe .		
Amount	51	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
You Owe	38	Estimated tax penalty (see instructions)	57	
Third		bu want to allow another person to discuss this return with the IRS? See instructions.		X No
Party	,			
Designee	Desig name	no number (PIN)	lication	
		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	ne best of my	
		they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		0
Sign	Your	signature Date Your occupation If th	e IRS sent y	ou an Identity
Here			tection PIN,	enter it here
		EMPLOYEE (see	e inst.)	
	Phone			
Paid	Prepa	arer's name Preparer's signature Date PTIN		ck if:
Preparer	SYAN	1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/02/2024 P0208	2703 🛛	Self-employed
Use Only	Firm's	s name GLOBAL TAXES LLC Phone r	10. (678)	965-9522
	Firm's	address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E	IN	
Go to www.irs.g	gov/Foi	m1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form 1	040-NR (2023)

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

2023	
Attachment	
Sequence No. 7B	

Your identifying number

693-77-8065

JAN	AKIRAMA PAVANKUMAR GORIPARTHI					693-75	7-80)65
Enter a	amount of income under the appropriate rate of tax. See instructions.		_					
	Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d)		(specify)
			(4) 1070	(8) 1070	(0) 00 / 0	<u> </u>	%	%
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations							
b	Dividends paid by foreign corporations							
С	Dividend equivalent payments received with respect to section 871(m) transaction	ons 10	;					
2	Interest:							
а	Mortgage							
b	Paid by foreign corporations							
С	Other							
3	Industrial royalties (patents, trademarks, etc.)							
4	Motion picture or TV copyright royalties							
5	Other royalties (copyrights, recording, publishing, etc.)							
6	Real property income and natural resources royalties							
7	Pensions and annuities							
8	Social security benefits							
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	Losses	. 10	c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed							
12	Other (specify):							
		10	2					
13	Add lines 1a through 12 in columns (a) through (d)		1			1		
14	Multiply line 13 by rate of tax at top of each column		•					
15	Tax on income not effectively connected with a U.S. trade or business. Add co		a) through (d) of line 14	4. Enter the total here	and on Form 1040	-NR, line 23a	15	
	Capital Gains and Losse	es Fror	n Sales or Excha	anges of Proper	ty			
losses f exchan within t	the United States and not (if necessary, attach statement of descriptive details not shown below)	acquired Id/yyyy	(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more tha subtract (d) from	an (d),	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	rely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
gains a	ty interest; report these nd losses on Schedule D							
(Form 1	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-

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

For Panerwork Reduction A	ct Notice, see the Instructions for Form 1040-NR.	
I OI I APELWOIK HEAUCION A		

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

BAA

18

. .

17 (

SCHE	DULE OI
(Form	1040-NR)

Other Information

OMB No. 1545-0074 \sim

	,			to Form 1040-NR.			2(0)	23
	ent of the Treasury	Go t	o www.irs.gov/Form1040NF		the latest information.		Attachment	
	Revenue Service		Answ	ver all questions.	v		Sequence N	o. /C
	nown on Form 1040		~~~~~			ur identifyin	•	
	KIRAMA PAV					93-77-8	3065	
A	Of what country	or countries v	vere you a citizen or nationa	I during the tax year?	INDIA			
B	In what country	did you claim	residence for tax purposes green card holder (lawful pe	during the tax year?	the United States		☐ Yes	
	•							
	Were you ever: A U.S. citizen?						Yes	🗙 No
			rmanent resident) of the Uni					X No
	•	· ·), see Pub. 519, chapter 4, f					
Е	-		day of the tax year, enter y			vour U.S.		
			day of the tax year. $F1$			-		
F	Have you ever	changed your v	visa type (nonimmigrant stati					🗙 No
			e the date and nature of the	change				
G	List all dates yo	u entered and	left the United States during					
			anada or Mexico AND com					
	check the box	for Canada or	Mexico and skip to item H	<u> </u>	🗌 Canada	Mexico		
	Date entered		Date departed United State	s Da	te entered United States		arted Unite	d States
	mm/c	id/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
				_				
	-							
ы		dava (including	vacation, nonworkdays, and		present in the United Stat			
н			, 2022					
I			return for any prior year? .				X Yes	No
			nd form number you filed:					
J	Are you filing a	return for a trus	st?				Yes	🗙 No
			U.S. or foreign owner under					
	U.S. person, or	receive a cont	ribution from a U.S. person?				Ves	🗌 No
			ation of \$250,000 or more c				Ves	🔀 No
			ative method to determine th		•		Yes	🗌 No
L			you are claiming exemption			treaty wit	h a foreigr	i country,
-	• • • •	0 ()	v. See Pub. 901 for more info					
1.			the applicable tax treaty article columns below. Attach For			imed the ti	reaty benef	it, and the
		•		•		(-D) A	nount of co	
	(a) Country			(b) Tax treaty article	(c) Number of months claimed in prior tax years		nount of ex in current t	
			1					

3.	Are you c	laiming treaty b	penefits pursu	ant to a C	Competen	t Authority determin	ation? .	 	 	Yes	🗙 No
	lf "Yes," a	attach a copy o	f the Compet	ent Autho	rity deterr	mination letter to you	ur return.				

Μ Check the applicable box if:

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