Form	8879	
Form	XX/U	

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Return completed Form 8879 to your ERO. (Don't send to the IRS.) ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)		
Taxpayer's name Social security nu	mber	
VISHNU SAI TURAGA 830-50-80	91	
Spouse's name Spouse's social s	ecurity numbe	r
Part I Tax Return Information – Tax Year Ending December 31, 2018 (Whole dollars o	nly)	
1 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)	. 1	77,820.
<b>2</b> Total tax (Form 1040, line 15; Form 1040NR, line 61)	. 2	10,421.
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62	a). <b>3</b>	13,348.
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)		2,927.
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	. 5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a	copy of y	our return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. 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 my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

## Taxnaver's PIN: check one hox only

Tanpay			X OIIIJ					1 1	1				
X	I authorize	GLOBAL	TAXES	LLC		to enter or generate m	iy PIN	0	8	0	9 1		
	ERO firm name							Enter five digits, but					
	as my signa <sup>.</sup>	ture on my	tax year	2018 electronically file	d income ta	k return.		don'	don't enter all zeros				
						cally filed income tax re r PIN method. The ERO							
Your sig	gnature 🕨 🔄					Date 🕨							
Spouse	's PIN: checl	k one box	only							T		٦	
	I authorize			ERO firm name		to enter or generate m	iy PIN						
				ERO firm name						•	its, but		
	as my signature on my tax year 2018 electronically filed income tax return.							don't enter all zeros					
						cally filed income tax rea r PIN method. The ERO							
Spouse	's signature 🕨	•				Date ►							
						- har a section of helpers							
						nly—continue below							
Part II	Certific	ation and	Auther	ntication – Practiti	oner PIN M	lethod Only							
									—		<u> </u>		

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpaver(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

## **ERO Must Retain This Form – See Instructions** Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see your tax return instructions. **BAA**  5 8 7 2 7 8 1 2 3 4 5

Don't enter all zeros

Form <b>1040NR</b> U.S. Nonresident Alien Income Tax Return > Go to www.irs.gov/Form1040NR for instructions and the latest information.						Ļ	OMB N	lo. 154	5-0074					
Department of the			For the ye	ear Janua	ary 1–December :	31, 2018, 0	or other	tax year				2(	01	8
Internal Revenue S			beginning name and initial	, 20	18, and ending				, 20		ifving n	imber (se		
			U SAI								)-50-	`	<i>c</i> 1130	uctions
		-	U SAL	iral route		0 box s	ee instri	ictions	Apt. no.	830	Check		Indivi	
Please print			E 143rd DR		j. Il you have a l	.0. 007, 3	ee moure		<i>Α</i> ρι. по.		Check			e or Trust
or type			or post office, state, and ZIP code. I	f vou hav	e a foreign addre	es also c	omplete	snaces he	low See i	nstruct	ons		LSIAI	
0. 900			TON CO $80602$	r you nav		555, 0150 0	ompiete	, 500000 00	.000.0001	1511 401	0113.			
		-	puntry name			Foreign	province	e/state/cou	ntv			Fore	ian nos	stal code
	1 010	ign oo				1 oroigit	province	, otato, ooa	, ny				ign pot	
	1		Reserved				4	Reserv	od.					
Filing	2		Single nonresident alien				5		d nonres	idont	alion			
Status	2	_	Reserved				5 ∟ 6 □	_	/ing wido			struction	20)	
Check only	3		neserveu				0	-	name		(See In:	struction	15)	
one box.								Child S						
Dependents	7	Dep	pendents: (see instructions)		(2) Depende			pendent's		(4) 🗸	if qualifie	es for (see	e instr.)	):
If more		(1)	First name Last name		identifying nu	mber	relation	ship to you	Chil	d tax c	redit	Credit for	r other o	dependents
than four														
dependents, see instructions														
and check														
here.														
lu e e un e	8	Wag	ges, salaries, tips, etc. Attach l	- orm(s)	W-2						8		77	,880.
Income Effectively	9a	Тах	able interest								9a			20.
Connected	b	Tax	-exempt interest. Do not inclu	ude on I	line 9a		9b							
With U.S.	10a	Ord	inary dividends								10a			
Trade/	b	Qua	lified dividends (see instructio	ns) .			10b							
Business	11	Taxa	able refunds, credits, or offset	s of sta	te and local in	come ta	xes (se	e instruc	tions)		11			
	12	Scho	olarship and fellowship grants. A	ttach Fo	rm(s) 1042-S o	r required	d staten	nent (see	instructio	ns)	12			
	13	Bus	iness income or (loss). Attach	Schedu	le C or C-EZ	(Form 10	040).				13			
	14		ital gain or (loss). Attach Sched			•	,			_	14			
	<b>15</b> Other gains or (losses). Attach Form 4797										15			
Attach Form(s) W-2, 1042-S,	16		erved								16			
SSA-1042S,	17a		s, pensions, and annuities	7a		17	' <b>b</b> Tax	able amo	unt (see ir	istr.)	17b			
RRB-1042S, and 8288-A	18		tal real estate, royalties, partn		, trusts, etc. A	ttach Sc	hedule	E (Form	1040)		18			
here. Also	19	Farr	m income or (loss). Attach Sch	edule F	(Form 1040)						19			
attach Form(s)			employment compensation .		. ,						20			
1099-R if tax was withheld.	21	Oth	er income. List type and amou	nt (see	instructions)						21			
			l income exempt by a treaty from p			n L (1)(e)	22							
			nbine the amounts in the far	-		. , . ,	ough 2	21. This	is your <b>t</b>	otal				
		effe	ctively connected income .								23		77	,900.
Adiustad	24	Edu	cator expenses (see instructio	ns) .			24							
Adjusted	25		Ith savings account deduction				25							
Gross	26	Мον	ving expenses for members of	of the A	rmed Forces.	. Attach								
Income		Forr	m 3903				26							
	27		luctible part of self-employme											
		(For	m 1040)				27							
	28	Self	-employed SEP, SIMPLE, and	qualifie	ed plans .		28							
	29	Self	-employed health insurance d	eductio	n (see instruct	tions)	29							
	30		alty on early withdrawal of sav				30							
	31	Sch	olarship and fellowship grants	exclud	ed		31							
	32	IRA	deduction (see instructions) .				32							
	33		dent loan interest deduction (s				33			80.				
	34	Add	l lines 24 through 33		80	• • •					34			
	35		usted Gross Income. Subtrac					<u></u> .	<u> </u>		35		77	,820.
Tax and	36	Amo	ount from line 35 (adjusted gro	ss inco	me)						36		77	,820.
	37	Iten	nized deductions from page 3	3, Sche	dule A, line 8	. Std. 1	Dẹdṇ	US/Ind	iạ Țre	aty	37		12	,000.
Credits	38	Qua	lified business income deduct	ion (see	e instructions)						38			
	39	Exe	mptions for estates and trusts	only (s	ee instructions	s) <u></u>			<u> </u>		39			
For Disclosure, P	rivacy	Act,	and Paperwork Reduction Act Not	ice, see	instructions.	BAA		RE	V 05/02/19 F	RO		Form 1	040	<b>VR</b> (2018)

Form 1040NR (201	8)								Pa	age <b>2</b>
Tanad	40	Add lines 37 through 39						40	12,00	)0.
Tax and	41	Taxable income. Subtract line 40 from line	e 36. If zero o	r less, en	ter -0-			41	65,82	20.
Credits	42	Tax (see instr.). Check if any is from Form(	s): <b>a</b> 🗌 8814	<b>b</b> 🗌 4	972	c	]	42	10,42	21.
(continued)	43	Alternative minimum tax (see instructions	s). Attach Fori	m 6251				43		
, ,	44	Excess advance premium tax credit repayr	ment. Attach	Form 896	62 .			44		
	45	Add lines 42, 43, and 44					🕨	45	10,42	21.
	46	Foreign tax credit. Attach Form 1116 if req	uired		46					
	47	Credit for child and dependent care expense	s. Attach Forn	n 2441	47					
	48	Retirement savings contributions credit. At	ttach Form 88	380.	48					
	49	Child tax credit and credit for other	•	•						
		instructions)			49					
	50	Residential energy credit. Attach Form 569	95		50					
	51	Other credits from Form: <b>a</b> 3800 <b>b</b>	8801 c		51					
	52	Add lines 46 through 51. These are your to	tal credits .					52		
	53	Subtract line 52 from line 45. If zero or less	s, enter -0				🕨	53	10,42	21.
0.1	54	Tax on income not effectively connected	d with a U.S	3. trade o	or bus	iness	from page 4,			
Other		Schedule NEC, line 15						54		
Taxes	55	Self-employment tax. Attach Schedule SE	(Form 1040)					55		
	56	Unreported social security and Medicare ta	ax from Form	: <b>a</b> 🗌 4	137	I	<b>b</b> 8919	56		
	57	Additional tax on IRAs, other qualified retire	ement plans,	etc. Attac	ch Forr	m 532	29 if required	57		
	58	Transportation tax (see instructions) .						58		
	<b>59</b> a	Household employment taxes from Schedu	ule H (Form 1	040) .				59a		
	k	Repayment of first-time homebuyer credit	from Form 54	105. Attac	h Forn	n 540	5 if required .	59b		
	60	Taxes from: a Form 8959 b Instruct	tions; enter co	ode(s)				60		
	61	Total tax. Add lines 53 through 60					🕨	61	10,42	21.
	62	Federal income tax withheld from:								
Payments	a	Form(s) W-2 and 1099.......			62a		13,348.			
	k	Form(s) 8805............			62b					
	c	: Form(s) 8288-A...........			62c					
	c	Form(s) 1042-S			62d					
	63	2018 estimated tax payments and amount app	olied from 2017	7 return	63					
	64	Additional child tax credit. Attach Schedule	e 8812		64					
	65	Net premium tax credit. Attach Form 8962			65					
	66	Amount paid with request for extension to	file (see instru	uctions)	66					
	67	Excess social security and tier 1 RRTA tax with			67					
	68	Credit for federal tax on fuels. Attach Form	14136		68					
	69	Credits from Form: <b>a</b> 2439 <b>b</b> Reserved <b>c</b>			69					
		Credit for amount paid with Form 1040-C			70					
	71	Add lines 62a through 70. These are your t	total paymen	its .				71	13,34	18.
	72	If line 71 is more than line 61, subtract line			the ar	noun	you overpaid	72	2,92	
Refund		Amount of line 72 you want refunded to yo					· · _	73a	2,92	
Direct deposit?							g 🗌 Savings			
See instructions.	c	Account number 7 9 7 0 8 9 9	0 6							
	e	If you want your refund check mailed to an address o	outside the United	d States not	t shown	on pag	ge 1, enter it here.			
	74	Amount of line 72 you want applied to your 20	019 estimated	l tax 🕨	74					
Amount	75	Amount you owe. Subtract line 71 from line			to pay.	see i	nstructions	75		
You Owe	76	Estimated tax penalty (see instructions)			76					
Third Party		you want to allow another person to discuss	this return w	ith the IR		e insti	ructions 🗌 🏻	es. Co	mplete below. 🛛	No
Designee	-		Phone				Personal i	dentificat		
		gnee's name	no.				number (F	,	▶	
Sign Here		r penalties of perjury, I declare that I have examined f, they are true, correct, and complete. Declaration of								
Keep a copy of							Inited States	If the IRS	S sent you an Identity	•
this return for	Date							on PIN, enter it here		
your records.				SOFTW	ARE I	DEVE	LOPER	,000 1100		
Deid	Prin	/Type preparer's name Preparer's	signature				Date	Oh'		<u> </u>
Paid	APP	NA RUPA VENKATA SATYA SAI MANIKUMAR						Check self-emp	└── if bloyed P0209033	32
Preparer		's name ► GLOBAL TAXES LLC					Firm's EIN ►			
Use Only Firm's name ► GLOBAL TAXES LLC Firm's EIN ► Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Phone no.										

Schedule A-	-Iten	nized Deductions (see instructions)		07
Taxes You Paid	1	State and local income taxes		
	а	State and local income taxes		
	b	Enter the smaller of line 1a and \$10,000 (\$5,000 if married)	1b	
Gifts to U.S.	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions       2		
Charities If you made a gift and	3	Other than by cash or check. If you made any gift of \$250 or         more, see instructions. You must attach Form 8283 if the         amount of your deduction is over \$500         3	-	
received a benefit in return, see instructions.	4	Carryover from prior year		
	5	Add lines 2 through 4	5	
Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		
Other Itemized Deductions	7	Other—from list in instructions. List type and amount	6	

Total<br/>Itemized<br/>Deductions8Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on<br/>Form 1040NR, line 37

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Form **1040NR** (2018)

Form	1040NR	(2018)
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Page	4
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		Schedule NEC-Tax on Income Not Ef	ffectively	Con	nected With	a U.S. Trade or	Business (see ir	structions)		
				E	Enter <b>amount of</b> i	ncome under the app	propriate rate of tax	(see instructions)		
		Nature of income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)		
					(a) 10%	<b>(b)</b> 1376	(C) 50 %	%	%	
1	Dividends and divide	end equivalents:								
а	Dividends paid by U	S. corporations	1	1a						
b	Dividends paid by fo	preign corporations	1	1b						
С		t payments received with respect to section								
	transactions		· · · 1	1c						
2	Interest:									
а				2a						
b	Paid by foreign corp	porations		2b						
С				2c						
3		patents, trademarks, etc.)		3						
4		V. copyright royalties		4						
5	• • • •	vrights, recording, publishing, etc.)		5						
6		e and natural resources royalties		6						
7		ties		7						
8	•	fits		8						
9				9	,					
10		ts of Canada only. Enter net income in column (c)	).							
_	If zero or less, ente Winnings	er -0								
a h			1	0c						
11			· · · ["							
				11						
12										
12			1	12						
13		12 in columns (a) through (d)		13						
14	-	rate of tax at top of each column		14						
15		of effectively connected with a U.S. trade of			d columns (a) t	hrough (d) of line 1	4. Enter the total	here and on		
		54								
		Capital Gains and								
	nly the capital gains and	<b>16</b> (a) Kind of property and description	(b) Date		(c) Date			(f) LOSS	(g) GAIN	
exchan	from property sales or ges that are from	(if necessary, attach statement of	acquired		sold	(d) Sales price	(e) Cost or other basis	If (e) is more than (d), subtract (d)	If (d) is more than (e), subtract (e)	
States	s within the United and not effectively	descriptive details not shown below) (i	(mo., day, yr.)		(mo., day, yr.)			from (e)	from (d)	
	ted with a U.S. business.								_	
Do not include a gain or loss on disposing of a U.S. real										
gains a	y interest; report these nd losses on Schedule D									
(Form 1 Report										
exchan	property sales or ges that are effectively									
on Scl	ted with a U.S. business hedule D (Form 1040),	<b>17</b> Add columns (f) and (g) of line 16					17			
Form 4	797, or both.	18 Capital gain. Combine columns (f) and (	(g) of line 1	7. En	ter the net gain	here and on line 9	above (if a loss, e	nter -0-) 🕨 18		

Μ

## Schedule OI-Other Information (see instructions) Answer all questions

- Of what country or countries were you a citizen or national during the tax year? INDIA Α
- In what country did you claim residence for tax purposes during the tax year? India В Have you ever applied to be a green card holder (lawful permanent resident) of the United States? 🗌 Yes 🛛 No С Were you ever: D **1.** A U.S. citizen?
- If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Е If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. F1
- F If you answered "Yes," indicate the date and nature of the change.
- G List all dates you entered and left the United States during 2018. See instructions. Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

н Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2016 <u>335</u>, 2017 <u>365</u>, and 2018 <u>365</u>. X Yes 🗌 No Did vou file a U.S. income tax return for any prior year? L

		<u> </u>	100		10
	If "Yes," give the latest year and form number you filed  1040NR				
J	Are you filing a return for a trust?		Yes	XI	No
	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a				
	U.S. person, or receive a contribution from a U.S. person?		Yes		No
к	Did you receive total compensation of \$250,000 or more during the tax year?		Yes	XI	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. 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 claimed in prior tax years	(d) Amount of exempt income in current tax year
	(e) Total. Enter this amount on Form 1040NR, line 22.	Do not enter it on line 8	8 or line 12 🕨	
2.	Were you subject to tax in a foreign country on any of the	e income shown in 1(d)	above?	🗌 Yes 🗌 No
З.	Are you claiming treaty benefits pursuant to a Competen	t Authority determination	on?	🗌 Yes 🛛 No
	If "Yes," attach a copy of the Competent Authority deterr	mination letter to your r	eturn.	
	Check the applicable box if:			
1.	This is the first year you are making an election to treat in		5	3
	with a U.S. trade or business under section 871(d). See in	nstructions		

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 . . . . . . . . . . . . . . . . .

> Form **1040NR** (2018) REV 05/02/19 PRO