## Form **8879**

### IRS e-file Signature Authorization

OMB No. 1545-0074

2018

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 number	ocial security number			
HARISH PEETANI	117-06-7648	648			
Spouse's name	Spouse's social security	number ,			
Part I Tax Return Information — Tax Year Endir	ng December 31, 2018 (Whole dollars only)				
1 Adjusted gross income (Form 1040, line 7; Form 1040	. , ,	<b>1</b> 11,520.			
·		2 0.			
3 Federal income tax withheld from Forms W-2 and 109		<b>3</b> 1,437.			
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, lin		4 1,437.			
5 Amount you owe (Form 1040, line 22; Form 1040NR, I		5			
	norization (Be sure you get and keep a cop	y of your return)			
for the tax year ending December 31, 2018, and to the best of my knowl in Part I above are the amounts from my electronic income tax return originator (ERO) to send my return to the IRS and to receive from the IR reason for any delay in processing the return or refund, and (c) the dax Agent to initiate an ACH electronic funds withdrawal (direct debit) entry of my federal taxes owed on this return and/or a payment of estimated to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requidate. I also authorize the financial institutions involved in the processing answer inquiries and resolve issues related to the payment. I further ac electronic income tax return and, if applicable, my Electronic Funds Without	I. I consent to allow my intermediate service provider, trans (a) an acknowledgement of receipt or reason for rejection e of any refund. If applicable, I authorize the U.S. Treasury to the financial institution account indicated in the tax preparax, and the financial institution to debit the entry to this accent to terminate the authorization. To revoke (cancel) a payments must be received no later than 2 business days prioring of the electronic payment of taxes to receive confident cknowledge that the personal identification number (PIN) b	nsmitter, or electronic return n of the transmission, (b) the and its designated Financial aration software for payment count. This authorization is to ment, I must contact the U.S. to the payment (settlement) tial information necessary to			
Taxpayer's PIN: check one box only					
X I authorize GLOBAL TAXES LLC	to enter or generate my PIN 6	7 6 4 8			
ERO firm name		er five digits, but			
as my signature on my tax year 2018 electronically f	filed income tax return. don	't enter all zeros			
I will enter my PIN as my signature on my tax year a entering your own PIN and your return is filed using					
Your signature ►	Date ▶				
Spouse's PIN: check one box only					
☐ I authorize	to enter or generate my PIN				
ERO firm name		er five digits, but			
as my signature on my tax year 2018 electronically f	filed income tax return. don	't enter all zeros			
I will enter my PIN as my signature on my tax year a entering your own PIN <b>and</b> your return is filed using					
Spouse's signature ▶	Date ▶				
Practitioner PIN Meth	nod Returns Only—continue below				
Part III Certification and Authentication — Practi					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your f	iivo digit con coloctod i iivi	8 1 2 3 4 5 er all zeros			
I certify that the above numeric entry is my PIN, which is my the taxpayer(s) indicated above. I confirm that I am submittir method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> F	ng this return in accordance with the requirements				
ERO's signature ▶	Date ▶				
	This Form — See Instructions				

# Form **1040NR**Department of the Treasury

#### **U.S. Nonresident Alien Income Tax Return**

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

For the year January 1-December 31, 2018, or other tax year

OMB No. 1545-0074

Internal Revenue Service beainnina , 2018, and ending Identifying number (see instructions) Your first name and initial Last name 117-06-7648 HARISH PEETANI Present home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: Individual Please print 3010 W YORKSHIRE DR 3135 Estate or Trust or type City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. PHOENIX AZ 85027 Foreign country name Foreign province/state/county Foreign postal code Reserved 4 Reserved **Filing** 2 X Single nonresident alien 5 Married nonresident alien **Status** 3 Reserved Qualifying widow(er) (see instructions) Check only Child's name ▶ one box. Dependents **Dependents:** (see instructions) (2) Dependent's (3) Dependent's (4) ✓ if qualifies for (see instr.): identifying number relationship to you If more Credit for other dependents Child tax credit (1) First name Last name than four dependents, see instructions and check here. 11,520 8 Wages, salaries, tips, etc. Attach Form(s) W-2 8 Income 9a Taxable interest . . . . . . . . . 9a **Effectively** b Tax-exempt interest. Do not include on line 9a 9b Connected 10a Ordinary dividends . . . . . . 10a With U.S. **b** Qualified dividends (see instructions) . . . . . . 10b Trade/ **Business** 11 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) . . . 11 12 Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement (see instructions) 12 13 Business income or (loss). Attach Schedule C or C-EZ (Form 1040) . . . . . . . . 13 14 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here 14 Other gains or (losses). Attach Form 4797 . . . . . . . . . 15 Attach Form(s) 16 Reserved . 16 W-2, 1042-S, SSA-1042S, **17b** Taxable amount (see instr.) **17a** IRAs, pensions, and annuities **17a** 17b RRB-1042S. 18 Rental real estate, royalties, partnerships, trusts, etc. Attach Schedule E (Form 1040) . . . 18 and 8288-A here. Also Farm income or (loss). Attach Schedule F (Form 1040) . . . . . . 19 attach Form(s) 20 20 1099-R if tax was withheld. 21 Other income. List type and amount (see instructions) 21 22 Total income exempt by a treaty from page 5, Schedule OI, Item L (1)(e) 23 Combine the amounts in the far right column for lines 8 through 21. This is your total 11,520. 23 Educator expenses (see instructions) . . . . . . . . 24 24 **Adjusted** Health savings account deduction. Attach Form 8889 . . . Gross Moving expenses for members of the Armed Forces, Attach Income Form 3903 . . . . . . . . . . . . . . . . . 26 27 Deductible part of self-employment tax. Attach Schedule SE 27 **28** Self-employed SEP, SIMPLE, and qualified plans . 28 29 Self-employed health insurance deduction (see instructions) **30** Penalty on early withdrawal of savings . . . . . . . . 30 Scholarship and fellowship grants excluded . . . . 31 **32** IRA deduction (see instructions) . . . . . . 32 33 Student loan interest deduction (see instructions) Add lines 24 through 33 . . . . . . . . . . 34 Adjusted Gross Income. Subtract line 34 from line 23. 11,520. 35 Amount from line 35 (adjusted gross income) . . . . 36 11,520. Tax and Itemized deductions from page 3, Schedule A, line 8 . Std. Dedn US/India Treaty 37 12,000. **Credits** Qualified business income deduction (see instructions). 38 Exemptions for estates and trusts only (see instructions) 39

12,000 Tax and **41 Taxable income.** Subtract line 40 from line 36. If zero or less, enter -0- . . . 41 Credits **42** Tax (see instr.). Check if any is from Form(s): a  $\square$  8814 b  $\square$  4972 c  $\square$ 42 0. (continued) Alternative minimum tax (see instructions). Attach Form 6251 . . . 43 Excess advance premium tax credit repayment. Attach Form 8962 . 44 Add lines 42, 43, and 44 . . . . . . . . . . . . . . . . 45 0. **46** Foreign tax credit. Attach Form 1116 if required . . . . 46 Credit for child and dependent care expenses. Attach Form 2441 48 Retirement savings contributions credit. Attach Form 8880 . 48 49 Child tax credit and credit for other dependents (see 49 **50** Residential energy credit. Attach Form 5695 . . . . . . 51 Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐ **52** Add lines 46 through 51. These are your **total credits** . . . 52 Subtract line 52 from line 45. If zero or less, enter -0-Tax on income not effectively connected with a U.S. trade or business from page 4. **Other** Taxes 55 Self-employment tax. Attach Schedule SE (Form 1040) . . . . . 55 **56** Unreported social security and Medicare tax from Form: **a** □ 4137 **b** 8919 56 57 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 57 **59a** Household employment taxes from Schedule H (Form 1040) . . . . . . 59a **b** Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required . 59b **60** Taxes from: **a** ☐ Form 8959 **b** ☐ Instructions; enter code(s) 61 Total tax. Add lines 53 through 60 . . . . . . 0. **62** Federal income tax withheld from: **Payments** a Form(s) W-2 and 1099 . . . . . . . . . . . . 1,437. 62a 62b **c** Form(s) 8288-A . . . . . . . . . . . 62c **d** Form(s) 1042-S . . . . . . . . . . . . 63 2018 estimated tax payments and amount applied from 2017 return 64 Additional child tax credit. Attach Schedule 8812 . . . . 65 Net premium tax credit. Attach Form 8962 . . . . . . 65 **66** Amount paid with request for extension to file (see instructions) **67** Excess social security and tier 1 RRTA tax withheld (see instructions) **68** Credit for federal tax on fuels. Attach Form 4136 . . . . 68 **69** Credits from Form: **a** 2439 **b** Reserved **c** 8885 **d** 69 **70** Credit for amount paid with Form 1040-C . . . . . . . 71 Add lines 62a through 70. These are your total payments 71 1,437. 72 If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid 72 1,437. Refund 73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here . ▶ □ 1,437. Direct deposit? **b** Routing number | 1 | 2 | 2 | 1 | 0 | 0 | 0 | 2 | 4 | c Type: X Checking ☐ Savings See **d** Account number | 3 | 6 | 5 | 9 | 7 | 1 | 5 | 0 | 3 | instructions. e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here. 74 Amount of line 72 you want applied to your 2019 estimated tax ▶ Amount **75 Amount you owe.** Subtract line 71 from line 61. For details on how to pay, see instructions 75 You Owe Do you want to allow another person to discuss this return with the IRS? See instructions X No ☐ Yes. Complete below. **Third Party** Phone Personal identification Designee Designee's name ▶ number (PIN) no. **>** 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 Sign Here belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. If the IRS sent you an Identity Your occupation in the United States Your signature Keep a copy of Date Protection PIN, enter it here this return for (see instr.) vour records. SOFTWARE ENGINEER Print/Type preparer's name Preparer's signature Date PTIN Check ☐ if Paid P02090332 APPANA RUPA VENKATA SATYA SAI MANIKUMAR self-employed Preparer Firm's name ► GLOBAL TAXES LLC Firm's EIN ▶ **Use Only** Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Phone no.

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

Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on

Itemized

**Deductions** 

8

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		Schedule NEC-Tax on Income Not	Effectively	Co	nnected With	a U.S. Trade or	Business (see in	nstructions)	. 490
				Enter amount of income under the appropriate rate of tax (see instructions)					
		Nature of income		(a) 10% (b) 15%		<b>(b)</b> 15%	(c) 30%	(d) Other	(specify)
					(4) 1070	(5) 1070	(0) 0070	%	%
1	Dividends and divide	•							
а	Dividends paid by U			1a					
b		reign corporations	_	1b					
С		payments received with respect to section							
				1c					
2	Interest:								
a			_	2a					
b		orations	_	2b					
С			_	2c					
3		patents, trademarks, etc.)		3					
4		/. copyright royalties	-	4					
5		rights, recording, publishing, etc.)	_	5					
6		e and natural resources royalties		6	<u> </u>				
7		ies	· · · ⊢	7	<u> </u>				
8		fits	· · · ⊢	8					
9		e 18 below	· · · -	9	,		,		
10	•	ts of Canada only. Enter net income in column	i (C).						
	If zero or less, ente	r -0							
a	Winnings								
b	Losses	·	1	l0c					
11		-Residents of countries other than Canada.							
40	OH(:6-)	owed		11					
12	Other (specify) ►			10					
40		10 in a clump (a) the court (d)		12					
13		12 in columns (a) through (d)		13 14					
14 15		ate of tax at top of each column			dd aalumna (a) th	rough (d) of line	14 Enter the total	hara and an	
15		54							
	10111110401411, 11110	Capital Gains a						15	
Enter o	nly the capital gains and			110				(f) LOSS	(g) GAIN
losses	from property sales or ges that are from	(a) Kind of property and description (if necessary, attach statement of	(b) Date acquired		(c) Date sold	(d) Sales price	(e) Cost or other	If (e) is more	If (d) is more
sources	within the United	descriptive details not shown below)	(mo., day, yr.)	)	(mo., day, yr.)	(6) 55.05 p.115	basis	than (d), subtract (d) from (e)	than (e), subtract (e) from (d)
connec	and not effectively ted with a U.S. business.			+				.,	(4)
	include a gain or loss on ng of a U.S. real			+					
propert	y interest; report these nd losses on Schedule D			+					
(Form 1				+					
	property sales or			_					
connec	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16 .					17	(	
	hedule D (Form 1040), 797, or both.	18 Capital gain. Combine columns (f) and	 nd (a) of line 1	 17. F	nter the net gain	here and on line 9		enter -0-) <b>18</b>	
		1	(9) 01 1110 1		uno mot gam	3 4114 511 1110 0	a. 2 7 2 (ii a 1300), c		

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	Schedule OI –	Other Information Answer all questions	(see instructions)					
A	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 pur		0 - 1'					
С	Have you ever applied to be a green card holder (la			□ Ves X No				
D	Were you ever:	widi permaneni reside	in or the office offices:					
	A U.S. citizen?			□ Vac ▼ No				
	A green card holder (lawful permanent resident) of							
۷.				L Yes 🔼 NO				
Е	If you answer "Yes" to (1) or (2), see Pub. 519, chap If you had a visa on the last day of the tax year, e			or vour II C				
_	immigration status on the last day of the tax year, e		you did not have a visa, enti	er your o.s.				
_								
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?							
_	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,  Check the box for Canada or Mexico and skip to item H						
				☐ Mexico				
	Date entered United States Date departed United Smm/dd/yy mm/dd/yy	States	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy				
	ППТ/ аа/ уу		IIIII/dd/yy	min/dd/yy				
Н	Give number of days (including vacation, nonworks 2016 , 2017 Did you file a U.S. income tax return for any prior years)	lays, and partial days) , and 2	you were present in the Unite 2018 365	ed States during:				
I	Did you file a U.S. income tax return for any prior ye	ear?		□ Yes ⊠ No				
	If "Yes," give the latest year and form number you f	iled ▶	1040NR					
J	Are you filing a return for a trust?			Yes 🛛 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?							
K	Did you receive total compensation of \$250,000 or	more during the tax ye	e during the tax year?					
	If "Yes," did you use an alternative method to deter							
L	Income Exempt from Tax—If you are claiming excomplete (1) through (3) below. See Pub. 901 for m			ax treaty with a foreign country,				
1.	Enter the name of the country, the applicable tax tr	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) Carratar	(b) Tax trea	ty (c) Number of months	d) Amount of exempt				
	(a) Country	article	claimed in prior tax yea					
	(e) Total. Enter this amount on Form 1040NR, lin	e 22. Do not enter it or	n line 8 or line 12	•				
2.		re you subject to tax in a foreign country on any of the income shown in 1(d) above?						
3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?							
	f "Yes," attach a copy of the Competent Authority determination letter to your return.							
M	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							
	with a U.S. trade or business under section 871(d). See instructions							
2.	You have made an election in a previous year that	at has not been revoke	ed, to treat income from rea	al property located in the United				