Form 8879	
------------------	--

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

▶ 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						
JAYAKRISHNAN S KARUNANITHI	767-55-7659	767-55-7659					
Spouse's name	Spouse's social securit	y number					
Dett. Tex Determine the Tex Very Finding December 01.00							
Part I Tax Return Information – Tax Year Ending December 31, 20		4 22.050					
 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35) Total tax (Form 1040, line 15; Form 1040NR, line 61)		1 33,270. 2 2,363					
 2 Total tax (Form 1040, line 15; Form 1040NR, line 61)							
 4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, 		3 4,271. 4 1,908.					
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure		-					
in Part I above are the amounts from my electronic income tax return. I consent to allow my in originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement reason for any delay in processing the return or refund, and (c) the date of any refund. If applicab Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution a of my federal 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 the authorit Treasury Financial Agent at 1-888-353-4537 . Payment cancellation requests must be received no date. I also authorize the financial institutions involved in the processing of the electronic payme answer inquiries and resolve issues related to the payment. I further acknowledge that the person electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	t of receipt or reason for rejection of authorize the U.S. Treasury account indicated in the tax prepution to debit the entry to this ac- ization. To revoke (cancel) a pay later than 2 business days price ent of taxes to receive confider	on of the transmission, (b) the v and its designated Financial paration software for payment count. This authorization is to ment, I must contact the U.S. ir to the payment (settlement) tial information necessary to					
Taxpayer's PIN: check one box only							
	er or generate my PIN	5 7 6 5 9					
ERO firm name	· · _	ter five digits, but					
as my signature on my tax year 2018 electronically filed income tax return.		n't enter all zeros					
I will enter my PIN as my signature on my tax year 2018 electronically file entering your own PIN and your return is filed using the Practitioner PIN m							
Your signature	Date ►						
Spouse's PIN: check one box only	_						
	er or generate my PIN						
ERO firm name as my signature on my tax year 2018 electronically filed income tax return.	En	ter five digits, but n't enter all zeros					
I will enter my PIN as my signature on my tax year 2018 electronically file entering your own PIN and your return is filed using the Practitioner PIN m							
Spouse's signature	Date ►						
Practitioner PIN Method Returns Only—co	ontinue below						
Part III Certification and Authentication – Practitioner PIN Method	Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected		8 1 2 3 4 5 ter all zeros					
I certify that the above numeric entry is my PIN, which is my signature for the tax the taxpayer(s) indicated above. I confirm that I am submitting this return in accord method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Individual I	dance with the requirement						
ERO's signature	Date ►						
ERO Must Retain This Form — See In Don't Submit This Form to the IRS Unless Re	structions						

Form 1040	U.S. Nonresident Alien Income Tax Return Go to www.irs.gov/Form1040NR for instructions and the latest information.					'n	L	OMB N	o. 1545-0074			
Department of the	Treas	ury	For the year Ja	nuary 1-December							20	18
Internal Revenue S			beginning , name and initial	2018, and ending				, 20		lifuing p		e instructions)
												e instructions)
			RISHNAN S ome address (number and street or rural ro			oo instru	otions	Apt. no.	/6		-7659	
Please print			,	ute). Il you nave a r	O. DOX, S	ee mstru	cuons.	Apt. 110. 609		Check		Individual
or type			Marquette Ave, or post office, state, and ZIP code. If you I	avo a foreign addr		omploto	spaces by		netruct	ions		Estate or Trust
or type				lave a loreign addit	ess, aiso c	ompiere	spaces be	10w. See 1	IStruct	10115.		
			APOLIS MN 55401		Foreign	province	/state/cou	ntv			Forei	gn postal code
	1010	gnoc	Junity hame		lioreigin	province	/state/cou	iity			1 Orei	gri postal code
	-		Reserved			4] Reser	(od				
Filing	1		Single nonresident alien			4	-	d nonres	idant	alian		
Status		_	Reserved			5 _	_				otruction	2
Check only	3		Reserved			6		/ing wido		(see m	struction	15)
one box.							Child S	name 🕨				
Dependents	7	Dep	pendents: (see instructions)	(2) Depende			pendent's		(4) 🗸	if qualifi	es for (see	instr.):
If more		(1)	First name Last name	identifying nu	mber	relations	ship to you	L Chil	d tax c	redit	Credit for	other dependents
than four												
dependents, see instructions												
and check												
here.												
	8	Wag	ges, salaries, tips, etc. Attach Form	(s) W-2						8	•	33,270.
Income	9a	Тах	able interest							9a		
Effectively Connected	b	Тах	-exempt interest. Do not include o	n line 9a		9b						
With U.S.			inary dividends							10a		
Trade/			alified dividends (see instructions)									
Business			able refunds, credits, or offsets of s				e instruc	tions)		11		
	12		cholarship and fellowship grants. Attach Form(s) 1042-S or required statement (see instructions)							12		
	13								,	13		
	14		vital gain or (loss). Attach Schedule D		•	,			_	14		i
	15		er gains or (losses). Attach Form 47	, ,	•					15		
Attach Form(s) W-2, 1042-S,	16		erved							16		
SSA-1042S,	17a		s, pensions, and annuities 17a					unt (see ir		17b		
RRB-1042S, and 8288-A	18	Ren	ital real estate, royalties, partnershi	os, trusts, etc. A	ttach Sc	hedule	E (Form	1040)	. <u>.</u>	18		
here. Also	19	Farr	m income or (loss). Attach Schedule	e F (Form 1040)						19		
attach Form(s) 1099-R if tax	20											
was withheld.	21	Oth	er income. List type and amount (se	ee instructions)						21		
			I income exempt by a treaty from page 5			22	[
	23	Con	nbine the amounts in the far right	t column for lin	es 8 thr	ough 2	1. This	is your t	otal			
		effe	ectively connected income							23		33,270.
Adjusted	24	Edu	icator expenses (see instructions)			24						
Adjusted	25	Hea	alth savings account deduction. Atta	ach Form 8889		25						
Gross	26		ving expenses for members of the									
Income			m 3903			26						
	27		luctible part of self-employment ta									
		(For	m 1040)			27						
	28	Self	-employed SEP, SIMPLE, and qual	ified plans .		28						
	29	Self	-employed health insurance deduc	tion (see instruc	tions)	29						
	30		alty on early withdrawal of savings			30						
	31	Sch	olarship and fellowship grants excl	uded		31						
	32	IRA	deduction (see instructions)			32						
	33	Stu	dent loan interest deduction (see in	structions) .		33						
	34		0							34		
	35	Adj	usted Gross Income. Subtract line	34 from line 23						35		33,270.
Tax and	36		ount from line 35 (adjusted gross in							36		33,270.
	37	Iten	nized deductions from page 3, Scl	nedule A, line 8	. Std. 1	Dẹdṇ	US/Ind	iạ Țre	aty	37		12,000.
Credits	38	Qua	alified business income deduction (s	see instructions)						38		
	39	Exe	mptions for estates and trusts only	(see instruction	s)					39		
For Disclosure, P	rivacy	Act,	and Paperwork Reduction Act Notice, s	ee instructions.	BAA		RE	V 05/02/19 F	RO		Form 1	040NR (2018)

Form 1040NR (201	8)								Page 2
Taward	40	Add lines 37 through 39						40	12,000.
Tax and	41	Taxable income. Subtract line 40 from						41	21,270.
Credits	42 Tax (see instr.). Check if any is from Form(s): a 8814 b 4972 c							42	2,363.
(continued)	g 43 Alternative minimum tax (see instructions). Attach Form 6251							43	
	44	Excess advance premium tax credit repa						44	
	45	Add lines 42, 43, and 44			· · .		🕨	45	2,363.
	46	Foreign tax credit. Attach Form 1116 if r	equired		46				
	47	Credit for child and dependent care expen	ses. Attach Form	า 2441	47				
	48	Retirement savings contributions credit.			48				
	49	Child tax credit and credit for oth	•	•					
		instructions)			49				
	50	Residential energy credit. Attach Form 5	695		50				
	51	Other credits from Form: a 3800 b	□ 8801 c □ _		51				
	52	Add lines 46 through 51. These are your						52	
	53	Subtract line 52 from line 45. If zero or le						53	2,363.
	54	Tax on income not effectively connect							
Other		Schedule NEC, line 15						54	
Taxes	55	Self-employment tax. Attach Schedule S	SE (Form 1040)					55	
	56	Unreported social security and Medicare	e tax from Form:	a 🗌 4	137	I	o 🗌 8919	56	
	57	Additional tax on IRAs, other qualified re	etirement plans, e	etc. Attao	ch For	m 532	9 if required	57	
	58	Transportation tax (see instructions) .						58	
	59 a	Household employment taxes from Sche	edule H (Form 10	040).				59a	
		Repayment of first-time homebuyer crea						59b	
	60	Taxes from: a Form 8959 b Instru	uctions; enter co	ode(s)				60	
	61	Total tax. Add lines 53 through 60					🕨	61	2,363.
Deserves	62	Federal income tax withheld from:							
Payments	a	Form(s) W-2 and 1099			62a		4,271.		
	k	Form(s) 8805...........			62b				
	c	; Form(s) 8288-A			62c				
	c	I Form(s) 1042-S			62d				
	63	2018 estimated tax payments and amount a	applied from 2017	' return	63				
	64	Additional child tax credit. Attach Sched	lule 8812		64				
	65	Net premium tax credit. Attach Form 89	62		65				
	66	Amount paid with request for extension t	to file (see instrue	ctions)	66				
	67	Excess social security and tier 1 RRTA tax w	ithheld (see instru	ctions)	67				
	68	Credit for federal tax on fuels. Attach Fo	rm 4136		68				
	69	Credits from Form: a 2439 b Reserved	c 🗌 8885 d 🗌		69				
	70	Credit for amount paid with Form 1040-	С		70				
	71	Add lines 62a through 70. These are you	ur total paymen t	ts.			🕨	71	4,271.
		If line 71 is more than line 61, subtract lir			the ar	nount	you overpaid	72	1,908.
Refund	73a	Amount of line 72 you want refunded to	you. If Form 88	888 is atta	ached,	chec	k here . 🕨 🗌	73a	1,908.
Direct deposit?	k	Routing number 0 9 1 0 0 0 0	0 2 2 🕨	c Type:	🗙 Ch	eckin	g 🗌 Savings		
See instructions.	c	Account number 1 0 4 7 8 4 5	5 3 2 5 9	0					
	e	If you want your refund check mailed to an addres	s outside the United	States not	t shown	on pag	ge 1, enter it here.		
	74	Amount of line 72 you want applied to your	r 2019 estimated	tax 🕨	74				
Amount	75	Amount you owe. Subtract line 71 from lin			to pay,	see i	nstructions	75	
You Owe	76	Estimated tax penalty (see instructions)			76				
Third Party	Doy	ou want to allow another person to discu	iss this return wi	th the IR	S? See	e insti	ructions 🗌 ۱	es. Co	mplete below. XNo
Designee			Phone				Personal		tion
		gnee's name ► er penalties of perjury, I declare that I have examin	no. ► ed this return and a	Iccompany	ina sch	edules	number (F	,	best of my knowledge and
Sign Here		f, they are true, correct, and complete. Declaration							
Keep a copy of	Your	signature	Date	Your occu	pation i	n the L	nited States		S sent you an Identity
this return for		-	2410					Protection (see inst	on PIN, enter it here r.)
your records.				SOFTW	ARE 1	ENGI	NEER		
Doid	Prin	/Type preparer's name Prepare	r's signature				Date	Check	
Paid Proparer	APPA	NA RUPA VENKATA SATYA SAI MANIKUMAR						self-emp	
Preparer Use Only	Firm	's name ► GLOBAL TAXES LLC					Firm's EIN ►		
USE Only	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 penefit in return, see nstructions.	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
Itemized
Deductions8Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on
Form 1040NR, line 37

REV 05/02/19 PRO

8

Form **1040NR** (2018)

Form	1040NR	(2018)
------	--------	--------

Page	4
------	---

		Schedule NEC-Tax on Income Not Ef	ffectively	Con	nected With	a U.S. Trade or	Business (see ir	structions)		
			E	Enter amount of income under the appropriate rate of tax (see instructions)						
	Nature of income				(a) 10% (b) 15%		(c) 30%	(d) Other	(specify)	
					(a) 10%	(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	16 (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)	
sources within the United descriptive details not shown below) (mo., day, y States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real		descriptive details not shown below) (i	(mo., day, yr.)		(mo., day, yr.)			from (e)	from (d)	
									_	
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),	17 Add columns (f) and (g) of line 16					17			
Form 4797, 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 С D Were you ever:
- 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
 , 2017
 , and 2018
 365
 .

 Did you file a U.S. income tax return for any prior year?
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 L

		· •	100		
	If "Yes," give the latest year and form number you filed 1040NR				
J	Are you filing a return for a trust?		Yes	X	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
κ	Did you receive total compensation of \$250,000 or more during the tax year?		Yes	X	No
	If "Yes," did you use an alternative method to determine the source of this compensation?				

- 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	(a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years		
	(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 with a U.S. trade or business under section 871(d). See in		5	

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