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.

Submis	sion Identification Number (SID)								
Taxpayer	Taxpayer's name Social security number								
SAI	CHAITYA NIKHILA KIRAN APPIDI	184-27-5472							
Spouse's	name	Spouse's social secur	rity numbe	r					
Part	Tax Return Information — Tax Year Ending December 31, 2018 (W	hole dollars only)						
	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)		·	35,478.					
	Total tax (Form 1040, line 15; Form 1040NR, line 61)			2,627.					
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1			3,946.					
	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a			1,319.					
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)								
Part I	Taxpayer Declaration and Signature Authorization (Be sure you ge	et and keep a co	opy of y	our return)					
reason fe Agent to of my fee remain in Treasury date. I a answer i	r (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receiver any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in deral taxes owed on this return and/or a payment of estimated tax, and the financial institution to do full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. T Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later that los authorize the financial institutions involved in the processing of the electronic payment of tax nquiries and resolve issues related to the payment. I further acknowledge that the personal ident c income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	norize the U.S. Treasu ndicated in the tax pre- ebit the entry to this a o revoke (cancel) a pa in 2 business days pri- xes to receive confide	ry and its eparation s account. Th ayment, I n ior to the ential infor	designated Financial software for payment his authorization is to hust contact the U.S. payment (settlement) mation necessary to					
Taxpay	/er's PIN: check one box only	Г							
X	l authorize GLOBAL TAXES LLC to enter or ge	enerate my PIN	7 5 4	7 2					
	ERO firm name	E	nter five d	igits, but					
	as my signature on my tax year 2018 electronically filed income tax return.	d	lon't enter	all zeros					
	I will enter my PIN as my signature on my tax year 2018 electronically filed incon entering your own PIN and your return is filed using the Practitioner PIN method.								
Your si	gnature ► Date ■								
Spous	e's PIN: check one box only	Г							
	I authorize to enter or ge	enerate my PIN							
	ERO firm name		nter five d						
	as my signature on my tax year 2018 electronically filed income tax return. don't enter all zeros								
	I will enter my PIN as my signature on my tax year 2018 electronically filed incomentering your own PIN and your return is filed using the Practitioner PIN method.								
Spouse	o's signature ► Date ■	•							
	Practitioner PIN Method Returns Only—continue	below							
Part I	I Certification and Authentication – Practitioner PIN Method Only								
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 7 Don't e	8 1	2 3 4 5 ros					
the tax	that the above numeric entry is my PIN, which is my signature for the tax year 20 payer(s) indicated above. I confirm that I am submitting this return in accordance value and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income	vith the requirement							
ERO's	signature ► Date ►								
	ERO Must Retain This Form — See Instruct	ions							

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040	NR	L Co to w	U.S. Nonresident Alien Income Tax Return ► Go to www.irs.gov/Form1040NR for instructions and the latest information.						L	OMB No. 1	545-0074			
Department of the Treasury Internal Revenue Service		ury	For the year January 1–December 31, 2018, or other tax year					20'	18					
Internal neveriue 3		first name and initial	, 4	Last name				, 20	Ident	ifving nu	mber (see in	structions)		
		I CHAITYA NIKHII	A VIDAN	APPIDI						34-27-5472				
		ent home address (number a			0 hox s	ee instruc	tions	Apt. no.	10-	L Check	_	vidual		
Please print)9 HIDDEN RIDGE		tej. Il you have a l	.0. 007, 3			3033		CHECK	_	ate or Trust		
or type		town or post office, state, ar	d ZIP code. If you be	ave a foreign addr	ess also o	omplete s			structi	ons				
0, 19		/ING TX 75038		ave a foreign addi	000, 000 0	ompiete s	paces be	ow. occ ii	1511 4011	0113.				
		gn country name			Foreign	province/s	state/cour	tv			Foreign r	ostal code		
	1 010	gh obann y namo			lionalight	01011100/0	1410/0041	, y			1 or or grin			
	1	Reserved				4	Reserv	ed						
Filing Status							dent	alien						
Status	3	Reserved				6					structions)			
Check only	5					•	-	name 🕨						
one box.							orma o	1						
Dependents	7	Dependents: (see instru	ictions)	(2) Depende identifying nu		(3) Deper relationsh			(4) 🗸	if qualifie	es for (see ins	tr.):		
If more than four		(1) First name	Last name	identifying hu	IIIDel	relations	iip to you	Child	d tax c	redit	Credit for othe	er dependents		
dependents,														
see instructions														
and check here.														
Income		Wages, salaries, tips, e	tc. Attach Form(s	s) W-2					•	8	3	5,478.		
Effectively									•	9a				
Connected		Tax-exempt interest.				9b								
With U.S.		Ordinary dividends .							·	10a				
Trade/		D Qualified dividends (see instructions)												
Business			axable refunds, credits, or offsets of state and local income taxes (see instructions)							11				
	12		cholarship 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				
Attach Form(s)	15	Other gains or (losses). Attach Form 4797							15					
W-2, 1042-S, SSA-1042S,	16								16					
RRB-1042S,		RAs, pensions, and annuities 17a 17b Taxable amount (see instr.) Rental real estate, royalties, partnerships, trusts, etc. Attach Schedule E (Form 1040)								17b				
and 8288-A here, Also	18									18				
attach Form(s)		arm income or (loss). Attach Schedule F (Form 1040)								19 20				
1099-R if tax		Other income. List type and amount (see instructions)								20				
was withheld.	21	Total income exempt by a	troaty from page 5	Schodulo OL Iton		22				21				
		Combine the amounts	, , ,	,	()()		This i	s vour te	ntal					
		effectively connected								23	3	5,478.		
	24	Educator expenses (se				24				2.5		-,_,0.		
Adjusted	25	Health savings account				25								
Gross	26	Moving expenses for I												
Income		Form 3903				26								
	27	Deductible part of self	-employment tax	k. Attach Sche	dule SE									
		(Form 1040)				27								
	28	Self-employed SEP, SI	MPLE, and qualif	ied plans .		28								
	29	Self-employed health in	nsurance deducti	on (see instruc	tions)	29								
	30	Penalty on early withdr	awal of savings .			30								
	31	Scholarship and fellows	ship grants exclu	ded		31								
	32	IRA deduction (see inst	ructions)			32								
	33	Student loan interest de	eduction (see ins [.]	tructions) .		33								
	34	Add lines 24 through 33								34				
	35	Adjusted Gross Incon								35	3	5,478.		
Tax and	36	Amount from line 35 (a								36		5,478.		
Credits	37	Itemized deductions f								37	1	2,000.		
	38	Qualified business inco	,	,						38				
	39	Exemptions for estates	and trusts only (see instruction	s)					39				

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.

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Tanad	40	Add lines 37 through 39					40	12,000.
Tax and	41	Taxable income. Subtract line 40 from	m line 36. If zero or less, e	enter -0			41	23,478.
Credits	42	Tax (see instr.). Check if any is from F	orm(s): a 8814 b	4972	c]	42	2,627.
(continued)	43	Alternative minimum tax (see instruct	tions). Attach Form 6251				43	
	44	Excess advance premium tax credit re					44	
	45	Add lines 42, 43, and 44		· ·		🕨	45	2,627.
	46	Foreign tax credit. Attach Form 1116	frequired	46				
	47	Credit for child and dependent care exp	enses. Attach Form 2441	47				
	48	Retirement savings contributions cred		48				
	49	Child tax credit and credit for						
		instructions)		49				
	50	Residential energy credit. Attach Form		50				
	51	Other credits from Form: $\mathbf{a} \square$ 3800	b 8801 c	51				
	52	Add lines 46 through 51. These are yo					52	
	53	Subtract line 52 from line 45. If zero o					53	2,627.
Other	54	Tax on income not effectively conn						
Other		Schedule NEC, line 15			· ·		54	
Taxes	55	Self-employment tax. Attach Schedule	e SE (Form 1040)				55	
	56	Unreported social security and Medic	are tax from Form: a	4137		b 🗌 8919	56	
	57	Additional tax on IRAs, other qualified	retirement plans, etc. Att	ach Fo	rm 532	29 if required	57	
	58	Transportation tax (see instructions)					58	
	59 a	Household employment taxes from So	chedule H (Form 1040) .				59a	
		Repayment of first-time homebuyer ci					59b	
	60	Taxes from: a Form 8959 b Ins	structions; enter code(s)				60	
	61	Total tax. Add lines 53 through 60 .				🕨	61	2,627.
. .	62	Federal income tax withheld from:						
Payments	a	Form(s) W-2 and 1099		62a		3,946.		
	k	Form(s) 8805		62b				
	c	: Form(s) 8288-A		62c				
	c	Form(s) 1042-S		62d				
	63	2018 estimated tax payments and amour	nt applied from 2017 return	63				
	64	Additional child tax credit. Attach Sch	edule 8812	64				
	65	Net premium tax credit. Attach Form 8	3962	65				
	66	Amount paid with request for extensio	n to file (see instructions)	66				
	67	Excess social security and tier 1 RRTA tax	withheld (see instructions)	67				
	68	Credit for federal tax on fuels. Attach	Form 4136	68				
	69	Credits from Form: a 2439 b Reserve	d c 🗌 8885 d 🗌	69				
	70	Credit for amount paid with Form 104	0-C	70				
	71	Add lines 62a through 70. These are y	our total payments .				71	3,946.
	72	If line 71 is more than line 61, subtract	line 61 from line 71. This	is the a	moun	t you overpaid	72	1,319.
Refund	73a	Amount of line 72 you want refunded	to you. If Form 8888 is a	ttachec	l, chec	k here . 🕨 🗌	73a	1,319.
Direct deposit?	k	Routing number 1 1 1 0 0 0	0 2 5 C Type:	Хс	heckir	ng 🗌 Savings		
See instructions.	c	Account number 4 8 8 0 4 5	1 0 4 9 9 4					
	e	If you want your refund check mailed to an add	ress outside the United States r	not show	n on pa	ge 1, enter it here.		
						-		
	74	Amount of line 72 you want applied to yo	our 2019 estimated tax 🕨	74				
Amount	75	Amount you owe. Subtract line 71 from	n line 61. For details on how	v to pay	, see i	nstructions	75	
You Owe	76	Estimated tax penalty (see instruction	s)	76				
Third Party	Doy	ou want to allow another person to dis	cuss this return with the I	RS? Se	e inst	ructions 🗌 ۱	/es. Co	mplete below. XNo
Designee			Phone			Personal		tion
		gnee's name ► er penalties of perjury, I declare that I have exar	no. ► nined this return and accompa	nvina scl	nedules	number (F	,	best of my knowledge and
Sign Here		f, they are true, correct, and complete. Declarat						
Keep a copy of	Your	signature	Date Your occ	cupation	in the L	Inited States		S sent you an Identity
this return for		-					Protection (see inst	on PIN, enter it here r.)
your records.			DEVOP	S AUTO	MATI	ON ENGINEER	,	
Deid	Prin	/Type preparer's name Prepa	arer's signature			Date	Check	
Paid	APPA	NA RUPA VENKATA SATYA SAI MANIKUMAR					Check self-emp	bloyed P02090332
Preparer Use Only		'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

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Form **1040NR** (2018)

Form	1040NR	(2018)
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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 amount of i	ncome under the app	propriate 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		payments received with respect to section							
	transactions		· · · 1	1c					
2	Interest:								
а				2a					
b	Paid by foreign corp	orations		2b					
С				2c					
3		patents, trademarks, etc.)		3					
4		V. copyright royalties		4					
5	• • • •	rights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7		ies		7					
8	•	fits	-	8					
9		e 18 below		9	,				
10	If zero or less, ente	ts of Canada only. Enter net income in column (c)).						
	Winnings	er -0							
a h			1	0c					
11			· · · ["						
			1	11					
12									
			- 1	12					
13		12 in columns (a) through (d)		13					
14	-	rate of tax at top of each column	-	14	· · · ·				
15		t effectively connected with a U.S. trade or			d columns (a) t	hrough (d) of line 1	4. Enter the total	here and on	
		54							
		Capital Gains and						I	
	nly the capital gains and from property sales or	16 (a) Kind of property and description	(b) Date		(c) Date			(f) LOSS	(g) GAIN
exchan	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 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		(mo., day, yr.)		(mo., day, yr.)			from (e)	from (d)	
gains a	nd losses on Schedule D								
(Form 1 Benort	property sales or								
exchan	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 Have you ever applied to be a green card holder (lawful permanent resident) of the United States? 🗌 Yes 🛛 No 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 <u>365</u>, 2017 <u>365</u>, and 2018 <u>365</u>. Did vou file a U.S. income tax return for any prior year? I

	If "Yes," give the latest year and form number you filed ► 1040NR			
J	Are you filing a return for a trust?	<u>ا</u>	íes 🛛	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?	<u> </u>	ſes 🗌	No
κ	Did you receive total compensation of \$250,000 or more during the tax year?	<u>ר</u> ו	íes 🛛	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		
3.	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

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