IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Submission Identification Number (SID)

T.....

Тахрау	/er's name		Social security number			
HAR	RIKA YEJJU	660-82-1549				
Spouse	e's name	Spous	se's soci	ial secu	irity number	
Par	t I Tax Return Information – Tax Year Ending December 31, 2022	(Enter	year	you a	re aut	horizing.)
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	1,750.
2	Total tax				2	0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	
4	Amount you want refunded to you				4	
5	Amount you owe				5	0.
Par	t II Taxpayer Declaration and Signature Authorization (Be sure you get	t and k	keep a	a copy	y of y	our return)
Under	r penalties of perjury, I declare that I have examined a copy of the income tax return (original or ar	nended)	l am n	ow aut	horizing	g, 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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

2	1	5	4	9	as my
			gits, all ze		asiny

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

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 D			•				 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Ce	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			6 all ze	 9	8	9

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 🕨					
	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So							
For Denomyork Deduction Act	Nation and your tox rature instructions		REV 02/14/22 RRO	Form 8879 (Pov. 01 2021)				

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040)-[Department of the Treasury-Inter U.S. Nonresident Ali	nal Reven	nue Service Come Tax R	eturn	2022	OMB No.	1545-007	74 IRS	S Use Only—Do not write or staple in this space.
For the year Ja	n. 1–	Dec. 31, 2022, or other tax year beginn	ing	,	2022, ei	nding		, 20		See separate instructions.
Filing Status Check only one box.		you checked the QSS box, enter the ch	Single Arried filing separately (MFS) Qualifying surviving spouse (QSS) I checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:							
Your first name	and		Last na						r ider	ntifying number
	- called									uctions)
HARIKA			YEJJ	U				66	0-8	2-1549
Home address	(num	ber and street). If you have a P.O. box	, see ins	tructions.						Apt. no.
1633 HOME	ESTI	EAD TRL								
City, town, or p	ost c	ffice. If you have a foreign address, als	so comp	lete spaces below	/.		State		Z	IP code
ALPHARET	ΓA						GA		3	0004
Foreign country	y nan	ne	Foreigr	n province/state/c	ounty		Foreig	n postal	code	•
Digital Assets		any time during 2022, did you: (a) recei erwise dispose of a digital asset (or a f								change, gift, or
Dependents	5						(4)	Check the	box if	qualifies for (see inst.):
(see instructions)		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to		hild tax c	redit	Credit for other dependents
	-	(I) First hame Last hame				(3) Relationship to	you			
If more than four										
dependents, see										
instructions and check here	-									
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)					1a	1,750.
Effectively	b	Household employee wages not rep							1b	
Connected	c	Tip income not reported on line 1a (s							1c	
With U.S.	d	Medicaid waiver payments not report							1d	
Trade or	e	Taxable dependent care benefits fro							1e	
Business	f	Employer-provided adoption benefit							1f	
Dusiness	g	Wages from Form 8919, line 6 								
Attach	h	Other earned income (see instructions)								
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use								
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L,								
here. Also		line 1(e)				. 1k				
attach	z	Add lines 1a through 1h	· ·						1z	1,750.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	1		b Taxa	ble interest		. [2b	
tax was	3a	Qualified dividends 3a	1		b Ordir	ary dividends .			3b	
withheld.	4a	IRA distributions 4a	1		b Taxa	ble amount			4b	
If you did not	5a	Pensions and annuities 5a				ble amount		-	5b	
get a Form W-2, see	6	Reserved for future use							6	
instructions.	7	Capital gain or (loss). Attach Schedu		, ,		-			7	
	8	Other income from Schedule 1 (Forn	,.					-	8	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	5. This is	s your total effect	ively col			•	9	1,750.
	10	Adjustments to income:				10-				
	a b	From Schedule 1 (Form 1040), line 2								
	b	Reserved for future use								
	c d	Reserved for future use							104	
	a 11	Subtract line 10d from line 9. This is							10d 11	1 750
	12									1,750.
	12	Itemized deductions (from Schedu deduction (see instructions)					dia, stan in US/India.		12	12,950.
	13a	Qualified business income deduction				1 1			14	12,930.
		b Exemptions for estates and trusts only (see instructions) 13b								
	c									
	14								13c 14	12,950.
	15	Subtract line 14 from line 11. If zero						-	15	0.
	<u>.</u> .	au Ast and Densmusely Badystian Ast								

Form **1040-NR** (2022)

Form 1040-NR (2	2022)					Page 2		
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 🗌 8814 2 🗌 497	2 3	16	0.		
Credits	17	Amount from Schedule 2 (Form 1040), line			17	0.		
	18	Add lines 16 and 17			18	0.		
	19	Child tax credit or credit for other depende	nts from Schedule 8812 (Form 10-	40)	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			22	0.		
	23a	Tax on income not effectively connected wi						
	Lou	Schedule NEC (Form 1040-NR), line 15		23a				
	b	Other taxes, including self-employment tax	, from Schedule 2 (Form 1040),					
		line 21		23b				
	с	Transportation tax (see instructions)		23c				
	d	Add lines 23a through 23c			23d			
	24	Add lines 22 and 23d. This is your total tax		<u></u>	24	0.		
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2		25a				
	b	Form(s) 1099		25b				
	с	Other forms (see instructions)		25c				
	d	Add lines 25a through 25c			25d			
	е	Form(s) 8805			25e			
	f	Form(s) 8288-A			25f			
	g	Form(s) 1042-S			25g			
	26	2022 estimated tax payments and amount	applied from 2021 return		26			
	27	Reserved for future use		27				
	28	Additional child tax credit from Schedule 8		28				
	29	Credit for amount paid with Form 1040-C		29				
	30	Reserved for future use		30				
	31	Amount from Schedule 3 (Form 1040), line		31				
	32	Add lines 28, 29, and 31. These are your to	tal other payments and refunda	ble credits	32			
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The second secon	nese are your total payments .		33			
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33. This is the amoun	t you overpaid	34			
	35a	Amount of line 34 you want refunded to yo	u. If Form 8888 is attached, chec	k here	35a			
Direct deposit?	b	Routing number X X X X X X	X X X c Type:	Checking Savings				
See instructions.	d	Account number X X X X X X						
	е	If you want your refund check mailed to an						
	36	Amount of line 34 you want applied to you	r 2023 estimated tax	36				
Amount	37	Subtract line 33 from line 24. This is the an	•					
You Owe		For details on how to pay, go to www.irs.go	ov/Payments or see instructions.		37	0.		
	38	Estimated tax penalty (see instructions) .		38				
Third	Do yo	u want to allow another person to discuss th	nis return with the IRS? See instrue	ctions. U Yes. Comp	lete below.	🗙 No		
Party	Desig	nee's	Phone	Personal identit	fication			
Designee	name		no	number (PIN)				
		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration o						
Sign		signature	Date Your occupation			ou an Identity		
Here	rour	signature	Pate Four occupation		tection PIN, e			
TIELE			STUDENT		e inst.)			
	Phone	e no.	Email address			······		
Paid	Prepa	rer's name Preparer's	s signature	Date PTIN	Cheo	ck if:		
		SYAM PR	IYA RAM SAGAR GUPTA TALLAM	02/20/2023 P0208	2703 🗆	Self-employed		
Preparer	Firm's	name SYAT REPAIRAT AND A GURTO TALLA		Phone r	10. (678)9	965-9522		
Use Only		address 245 ROONEY CT E BR	(= =) =	171965				
Go to www.irs.g	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN Go to www.irs.gov/Form1040NR for instructions and the latest information. REV 02/14/23 PRO REV 02/14/23 PRO							

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

HARIKA YEJJU

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

Attach to Form 1040-NR.



Name shown on Form 1040-NR

Your identifying number

660-82-1549

Enter amount of income	under the appropriate	rate of tax. S	See instructions.

Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
						(a) 10%	(b) 13%	(c) 50 %	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.	.S. cor	porations		1a					
b	Dividends paid by fo	reign corporations								
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	oratior	NS		2b					
С	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property income	e and i	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0									
а	Winnings									
b	Losses				10c					
11	Note: Losses not allo	owed	lents of countries other than Canada.		11					
12	Other (specify):									
					12					
13	0		columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines						-NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	nges of Proper	ty		
losses f exchan within t	nly the capital gains and from property sales or ges that are from sources the United States and not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	vely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real ty interest; report these									
gains a	nd losses on Schedule D									
(Form 1										
exchan	property sales or ges that are effectively									
connec on Sche	eted with a U.S. business edule D (Form 1040),								()	
	1797, or both.	18	Capital gain. Combine columns (f) and	(g) of line 17	'. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 18	

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

	DULE OI		Othe	r Information			OMB No. 15	45-0074	
(Form	1040-NR)	Go t	Go to www.irs.gov/Form1040NR for instructions and the latest information.						
	ent of the Treasury			h to Form 1040-NR.			Attachment	70	
	Revenue Service hown on Form 1040	-NB	Ans	wer all questions.		Your identify	Sequence N	0.70	
	IKA YEJJU	-111				660-82-	•		
A		v or countries v	vere you a citizen or nation	al during the tax year	? TNDTA				
В	In what country	/ did you claim	United States						
С	Have you ever	applied to be a	green card holder (lawful p	permanent resident) of	the United States? .		Yes	No	
D	Were you ever:								
	A U.S. citizen?							🛛 No	
2.	-		rmanent resident) of the Ur				Yes	X No	
_	-		2), see Pub. 519, chapter 4,						
E	immigration sta	tus on the last o	day of the tax year, enter day of the tax year. <u>F1</u>				-	_	
F	Have you ever	changed your v	visa type (nonimmigrant sta te the date and nature of th	tus) or U.S. immigrati	on status?		. 🗌 Yes	X No	
G	List all dates yo	ou entered and	left the United States durin	g 2022. See instructio	ons.				
			Canada or Mexico AND con Mexico and skip to item H			ient intervals			
	Date entered mm/c	United States dd/yy	Date departed United Stat mm/dd/yy	es Da	ate entered United State mm/dd/yy	es Date de	eparted Unite mm/dd/yy	d States	
						<u> </u>			
н	2020		vacation, nonworkdays, and , 2021	, and 20	365	· · ·			
I	If "Yes," give th	ie latest year ar	return for any prior year? . nd form number you filed:	10	40nr			∐ No	
J			st?					🗙 No	
			U.S. or foreign owner under ribution from a U.S. person					No	
Κ	-		sation of \$250,000 or more					X No	
			ative method to determine		•			No	
L	complete (1) th	rough (3) below	f you are claiming exempt /. See Pub. 901 for more in	formation on tax treat	ies.	-	-	-	
1.			the applicable tax treaty and the columns below. Attach Fe			claimed the	treaty benefi	t, and the	
		(a) Cou	intry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		Amount of exe e in current ta		
	() -								
~			n Form 1040-NR, line 1k. E	-					
			preign country on any of the ts pursuant to a Competen				Yes	□ No ⊠ No	
0.	-		Competent Authority deterr						

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

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/14/23 PRO Schedule OI (Form 1040-NR) 2022