Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Subm	ission Identification Number (SID)					
Taxpaye	er's name	Social security number				
PRA'	THYUSHA MANNAM	144-85-6037				
Spouse	's name	Spouse's social security number				
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	⊥ r year you a	re aut	horizing.)		
Enter	whole dollars only on lines 1 through 5.			<u> </u>		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	48,703.		
2	Total tax		2	4,088.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,346.		
4	Amount you want refunded to you		4	2,258.		
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
to send for any Agent in payme authoric payme busines taxes it person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abo (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmound my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for federal taxes owed on this return and/or a payment of estimated tax, and the financial institutivation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation registed adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the lad identification number (PIN) below is my signature for the income tax return (original or amended) I a nic Funds Withdrawal Consent.	uitter, or electro- ection of the tr .S. Treasury an icated in the ta on to debit the e the authoriza- uests must be processing of payment. I furt	onic return ansmission of its discount of its	urn originator (ERO) sion, (b) the reason esignated Financial aration software for o this account. This o revoke (cancel) a red no later than 2 extronic payment of knowledge that the		
	yer's PIN: check one box only					
X		my PINI 5	6 0	3 7 as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent		digits, but all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Yours	signature ▶ Date ▶					
0	and DINI also de consideración					
Spous	se's PIN: check one box only	DIN				
	I authorize to enter or generate	,	tor five o	as my		
	signature on the income tax return (original or amended) I am now authorizing.			all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ente	6 6 er all zei	1 9 8 9 ros		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the fortax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	ırn in a	ccordance with the		
EBO's	signature ► Date ►					
	ERO Must Retain This Form — See Instructions					

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

Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2022

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Ja	ın. 1–C	Dec. 31, 2022, or other tax year begin	ning	, 2022,	ending	,	20		ee separate nstructions.		
Filing Status		Single		MFS) Qualifyir	ng surviving spouse	(QSS)	☐ Est		☐ Trust		
Check only one box.	"	you checked the QSS box, effer the C									
Your first name and middle initial Last name You								Your identifying number (see instructions)			
PRATHYUS	HA		MANN	IAM			144-	85-6	5037		
Home address	(num	ber and street). If you have a P.O. bo	x, see ins	structions.					Apt. no.		
6445 LOV	E DR				20	02					
City, town, or p	oost o	ffice. If you have a foreign address, a	also comp	olete spaces below.		State		ZIP co	ode		
IRVING						TX		7503	39		
Foreign countr	y nam	е	Foreig	n province/state/county		Foreign p	postal cod	de			
Digital Asset		ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or a					r (b) sell, e		nge, gift, or Yes 🔀 No		
Dependents	9	· · · · · · · · · · · · · · · · · · ·			, ,	(4) Ch	eck the box	if quali	fies for (see inst.):		
(see instructions				(2) Dependent's		Chil	d tax credi	credit Credit			
(****	´	(1) First name Last name	e	identifying number	(3) Relationship to y	ou O''''		`	dependents		
If more than fou	r										
dependents, see							<u> </u>				
instructions and				-				_			
check here				<u> </u>							
Income	1a	Total amount from Form(s) W-2, bo	,	,					48,703.		
Effectively	b	Household employee wages not re	•	` '							
Connected	С	Tip income not reported on line 1a	`	,							
With U.S.	d	Medicaid waiver payments not rep		()	,		. 1d				
Trade or	е	Taxable dependent care benefits fi		·			. 1e				
Business	f	Employer-provided adoption benef		•			. 1f				
Attach	9	Wages from Form 8919, line 6 .					. 1g				
Form(s) W-2,	h	Other earned income (see instruction	,				. 1h				
1042-S, SSA-1042-S,	i	Reserved for future use			<u>li</u>		4.				
RRB-1042-S,	J	Reserved for future use					. <u>1j</u>				
and 8288-A	k	Total income exempt by a treaty fro		,	·						
here. Also attach		line 1(e)			1k				40 702		
Form(s)	z	Add lines 1a through 1h	1	1			. 1z		48,703.		
1099-R if	2a	· —	2a				. 2b				
tax was withheld.	3a		3a		dinary dividends .		. 3b				
	4a		4a		cable amount						
If you did not get a Form	5a 6	Pensions and annuities	5a								
W-2, see	о 7	Capital gain or (loss). Attach Scheo									
instructions.	8	Other income from Schedule 1 (Fo									
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and							/Q 702		
	10	Add lines 12, 25, 35, 45, 55, 7, and Adjustments to income:	. O. 11115 R	s your total effectively C			. 9		48,703.		
		From Schedule 1 (Form 1040), line	26		10a						
	a b	Reserved for future use									
	C	Reserved for future use									
	d	Enter the amount from line 10a. Th	. 10d								
	11	Subtract line 10d from line 9. This is	,	•					48,703.		
	12	Itemized deductions (from Sched	dule A (Fo	orm 1040-NR)) or, for cer	tain residents of Inc	ia, standa	ırd				
		deduction (see instructions)			Std Dedn	_US/India_Tre	aty 12		12,950.		
	13a	Qualified business income deducti	on from F	Form 8995 or Form 8995-	·A . 13a						
	b	Exemptions for estates and trusts	only (see	instructions)	13b						
	С	Add lines 13a and 13b					. 13c				
	14								12,950.		
	15	Subtract line 14 from line 11. If zero	o or less	enter -0- This is your ta	xable income		15	1	35 753		

Form 1040-NR (2	2022)								Page 2		
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1 88	314 2 🗌 497	′2 3 🗌		16	4,088.		
Credits	17	Amount from Schedule 2 (Form						17	0.		
	18	Add lines 16 and 17						18	4,088.		
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 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 z	zero or less	s, enter -0				22	4,088.		
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business from						
		Schedule NEC (Form 1040-NR),	line 15 .			23a					
	b	Other taxes, including self-empl	oyment ta	x, from Schedul	e 2 (Form 1040),						
		line 21				23b					
	С	Transportation tax (see instruction	ons)			23c					
	d	Add lines 23a through 23c						23d			
	24	Add lines 22 and 23d. This is yo	ur total ta	x				24	4,088.		
Payments Payments	25	Federal income tax withheld from									
	а	Form(s) W-2					346.	-			
	b	Form(s) 1099				25b		-			
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c						25d	6,346.		
	е	Form(s) 8805						25e			
	f	Form(s) 8288-A						25f			
	g	Form(s) 1042-S						25g			
	26	2022 estimated tax payments ar						26			
	27	Reserved for future use				27		-			
	28	Additional child tax credit from S		•	,	28		-			
	29 30	Credit for amount paid with Form Reserved for future use				30					
	31	Amount from Schedule 3 (Form				31					
	32	Add lines 28, 29, and 31. These	, .					32			
	33	Add lines 25d, 25e, 25f, 25g, 26						33	6,346.		
Refund	34	If line 33 is more than line 24, su						34	2,258.		
neiuliu	35a	Amount of line 34 you want refu				•		35a	2,258.		
Direct deposit?	b	Routing number 1 1 1 (_	Checking		000	2,2301		
See instructions.	d	Account number 6 9 3 !					ourgo				
	е	If you want your refund check m	page 1.								
		enter it here.									
	36	Amount of line 34 you want app	lied to you	ur 2023 estimat	ed tax	36					
Amount	37	Subtract line 33 from line 24. Th	is is the ar	mount you owe							
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions .			37			
	38	Estimated tax penalty (see instru	uctions) .			38					
Third	Do yo	ete belo	ow. 🛛 No								
Party	Designee's Phone Person							cation _r			
Designee											
		penalties of perjury, I declare that I ha they are true, correct, and complete. I									
Sign			Jeciai ation (ent you an Identity		
Here	Your signature			Date Your occupation			l l		PIN, enter it here		
TICIC					STUDENT		I	inst.)			
	Phone	e no.		Email address	•		1				
Paid	Prepa	ırer's name	Preparer	's signature		Date	PTIN		Check if:		
Preparer			SYAM PR	RIYA RAM SAGAR	R GUPTA TALLAM	02/18/2023	P02082	2703	Self-employed		
Use Only	I Firm's name SV ANT PROVAT PANTASATABE (FILTER)							0. (67	8)965-9522		
OSE OILLY	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816								Firm's EIN 84-3171965		

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

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

2022	
Attachment	
Sequence No. / L	į

Name shown on Form 1040-NR Your identifying number PRATHYUSHA MANNAM 144-85-6037 Enter **amount of income** under the appropriate rate of tax. See instructions.

Notice of Income				() 100/	4) 450/	4.3.000/	(d) Other (specify)			
	Nature of Income				(a) 10%	(b) 15%	(c) 30%	%	%	
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.	S. co	porations		1a					
b	Dividends paid by fo	reign (corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) t	ransactions	1c					
2	Interest:									
а	Mortgage									
b	Paid by foreign corpo	oratio	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	соруг	right royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling—Resident If zero or less, enter	s of C	anada only. Enter net income in column (c	e).						
_	•									
a b					10c					
11	Losses Gambling winnings	- Resid			100					
•••	Note: Losses not allow		owed							
12	Other (specify):									
					12					
13			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 and	d Losses F	rom	Sales or Excha	inges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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).
	ely connected with a U.S. s. Do not include a gain									
or loss on disposing of a U.S. real property interest; report these										
gains ai	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
	connected with a U.S. business on Schedule D (Form 1040),								()	
Form 4797, or both.		18	Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	er -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

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

Attach to Form 1040-NR.

Answer all questions.

2022 Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Nam	e sł	nown on Form 1040-NR				Your identifying	number				
PR	.AT	HYUSHA MANNAM				144-85-6037					
Α		Of what country or countries w									
В		In what country did you claim residence for tax purposes during the tax year? United States									
С		Have you ever applied to be a green card holder (lawful permanent resident) of the United States?									
D		Were you ever: A U.S. citizen?									
		L. A U.S. citizen?									
	2.			∐ Yes	⊠ No						
_		If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
Ε		If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1									
F		Have you ever changed your vill f you answered "Yes," indicate	isa type (nonimmigrant sta	tus) or U.S. immig	gration status?		∐ Yes	⊠ No			
G		List all dates you entered and I	eft the United States during	g 2022. See instru	uctions.						
		Note: If you're a resident of Cocheck the box for Canada or	anada or Mexico AND cor Mexico and skip to item F	nmute to work in	the United States at frequence	ent intervals, Mexico					
		Date entered United States	Date departed United State		Date entered United State		rted United	d States			
		mm/dd/yy	mm/dd/yy		mm/dd/yy		nm/dd/yy				
Н		Give number of days (including 2020									
I		Did you file a U.S. income tax I If "Yes," give the latest year an	return for any prior year?.				X Yes	□No			
J		Are you filing a return for a trus	st?				Yes	⊠ No			
		If "Yes," did the trust have a U.S. person, or receive a contr	J.S. or foreign owner unde	r the grantor trus	t rules, make a distributior	or loan to a	Yes	□No			
K		Did you receive total compens					Yes	⊠ No			
		If "Yes," did you use an alterna	ative method to determine t	the source of this	compensation?		☐ Yes	☐ No			
L		Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign	country,			
	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) Cour		(b) Tax treaty art		, , ,					
								,			
		(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it any	where else on line 1						
	2.	Were you subject to tax in a fo	reign country on any of the	income shown in	n 1(d) above?		Yes	☐ No			
	3.	Are you claiming treaty benefit		-			☐ Yes	⊠ No			
		If "Yes," attach a copy of the C	Competent Authority detern	nination letter to y	our return.						
M		Check the applicable box if:									
		This is the first year you are may with a U.S. trade or business u	inder section 871(d). See in	structions				. 🗆			
	2.	You have made an election in States as effectively connected									