## 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	nission Identification Number (SID)					
Taxpay	ver's name	Social securit	y numb	er		
AMR	RITHA SURESH	747-85-	747-85-6147			
Spouse	o's name	Spouse's soc	social security number			
Par	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.					
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	16,952		
2	Total tax		2	403		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	488		
4	Amount you want refunded to you		4	85		
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					
return to sen for any Agent payme author payme busine taxes persor	cowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abort (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independ on the form of the foliation of the financial institution account independent of the financial institution account independent in the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the phalicidential information in the financial institution or amended) I applied to the financial withdrawal Consent.	itter, 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	enic returnished its distance of its distance	urn originator (ER sion, (b) the rease esignated Financ aration software to this account. The revoke (cancel) red no later than ectronic payment knowledge that ti		
	ayer's PIN: check one box only					
-	I authorize GLOBAL TAXES LLC to enter or generate	mv PIN 5	6 1	4 7 as m		
	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 <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your	signature ▶ Date ▶					
Snou	se's PIN: check one box only					
Г	☐ I authorize to enter or generate	my PIN		as m		
	ERO firm name		er five o	digits, but		
	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 <b>and</b> your return is filed using the Practitioner PIN meth below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
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		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to trized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subnumerments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in a	ccordance with t		
FR∩'	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	n. 1–D	Dec. 31, 2022, or other tax year begin	nning	, 2022,	ending	:	20		ee separate structions.
Filing Status		Single Married filing se	. , ,	,	ng surviving spouse			tate	☐ Trust
Check only one box.					•				
Your first name	and	middle initial	Last na	ame			Your id (see ins		ng number ns)
AMRITHA			SURE	SH			747-	85-6	147
Home address	(num	ber and street). If you have a P.O. bo	ox, see ins	structions.					Apt. no.
4950, HEAT	THER	DRIVE			10	1			
City, town, or p	ost o	ffice. If you have a foreign address,	also comp	lete spaces below.		State		ZIP cod	de
DEARBORN						MI		4812	6
Foreign countr	y nam	е	Foreign	n province/state/county		Foreign	postal co	de	
Digital Assets		ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or a					or (b) sell,		
Dependents	3			_	-	(4) Ch	eck the box	x if qualif	fies for (see inst.):
(see instructions)		(1) First name Last name		(2) Dependent's identifying number (3) Relationshi			ld tax cred	it C	credit for other dependents
If more than fou	r 🖳						Щ	$\perp$	Ц
dependents, see								$\perp$	
instructions and									
check here								$+\!\!\!\!-$	
Income	1a	Total amount from Form(s) W-2, b	•	,					19,452.
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		` '	,				
Trade or	е	Taxable dependent care benefits f		•					
Business	f	Employer-provided adoption bene		·			. 1f		
Attach	g	Wages from Form 8919, line 6.							
Form(s) W-2,	h	Other earned income (see instruct	. 1h	_					
1042-S,	i	Reserved for future use		4					
SSA-1042-S, RRB-1042-S,	j	Reserved for future use	. <u>1j</u>	_					
and 8288-A	k	Total income exempt by a treaty fr							
here. Also		( )			1k			4	10 450
attach Form(s)	Z	Add lines 1a through 1h	1	1			. 1z		19,452.
1099-R if	2a	·	2a		able interest		. 2b		
tax was	_	_	3a		linary dividends .		. 3b		
withheld.	4a	<del>-</del>	4a		able amount				
If you did not get a Form	5a	_	5a		able amount				
W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Sche	•		•			+	
	8	Other income from Schedule 1 (Fo						+	10 470
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	a 8. This is	s your total effectively c	onnected income		. 9		19,452.
	10	Adjustments to income:	00			0 = -			
	a	From Schedule 1 (Form 1040), line				2,50	0.		
	b	Reserved for future use							
	C	Reserved for future use					10.1		
	d	Enter the amount from line 10a. The	•	=					2,500.
	11	Subtract line 10d from line 9. This						+	16,952.
	12	<b>Itemized deductions</b> (from Scheddeduction (see instructions)	ard eaty 12	$\perp$	12,950.				
	13a	Qualified business income deduct			<del></del>				
	b	Exemptions for estates and trusts							
	С	Add lines 13a and 13b							
	14								12,950.
	15	Subtract line 14 from line 11. If zer	o or less.	enter -0 This is your tax	xable income .		. 15	1	4,002.

Form 1040-NR (2	2022)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): <b>1</b> 88	314 <b>2</b> 497	72 <b>3</b> 🗌		16	403.
Credits	17	Amount from Schedule 2 (Form						17	0.
	18	Add lines 16 and 17		18	403.				
	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	403.
	23a	Tax on income not effectively co	nnected w	vith 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 <b>total ta</b>	x				24	403.
Payments <b>Payments</b>	25	Federal income tax withheld from							
	а	Form(s) W-2				25a	488.	-	
	b	Form(s) 1099				25b		-	
	С	Other forms (see instructions)				25c		-	
	d	Add lines 25a through 25c						25d	488.
	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		4	
	28	Additional child tax credit from S		•	,	28		-	
	29	Credit for amount paid with Form				29		-	
	30	Reserved for future use				30		4	
	31	Amount from Schedule 3 (Form	, .			31		20	
	32 33	Add lines 28, 29, and 31. These Add lines 25d, 25e, 25f, 25g, 26						32	488.
Defund	34	If line 33 is more than line 24, su						34	85.
Refund	35a	Amount of line 34 you want <b>refu</b>				•		35a	85.
Direct deposit?	b	Routing number 0 9 1 (				Checking		JJa	03.
See instructions.	d	Account number 9 9 9 8					Gavings		
	e	If you want your refund check m				es not shown on	nage 1		
	·	-							
	36	enter it here.  Amount of line 34 you want app	lied to voi	ur 2023 estimat	ed tax	36		1	
Amount	37	Subtract line 33 from line 24. Th						$\Box$	
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	ou want to allow another person to	discuss t	his return with th	ne IRS? See instru	ictions.	es. Compl	ete bel	ow. 🛛 No
Party	Designee's Phone Personal ident								
Designee	name no. number (PIN)								
		penalties of perjury, I declare that I ha they are true, correct, and complete. I							
Sign	Your	signature		Date	Your occupation	1	If the	e IRS se	ent you an Identity
Here							Prot	ection [	PIN, enter it here
-					SOFTWARE I	ENGINEER	(see	inst.)	
	Phone			Email address		T. B. :	DT:::		
Paid	Prepa	irer's name		's signature	_	Date	PTIN		Check if:
Preparer					R GUPTA TALLAM	02/25/2023	P02082		Self-employed
Use Only		s name SYAMILPREMALRAMIASKARS G					Phone n		78)965-9522
· · · · · ·	Firm's	address 245 ROONEY (	CT E BE	RUNSWICK N	J 08816		Firm's El	N 8	4-3171965

# SCHEDULE 1 (Form 1040)

#### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

ame	(s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	cial se	curity numb	er
MRI	THA SURESH		747-8	35-614	:7	
Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes			1		
2a	Alimony received			2a		
b	Date of original divorce or separation agreement (see instructions):					
3	Business income or (loss). Attach Schedule C			3		
4	Other gains or (losses). Attach Form 4797			4		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule	Ε.	5		
6	Farm income or (loss). Attach Schedule F			6		
7	Unemployment compensation			7		
8	Other income:					
а	Net operating loss	8a (	)			
b	Gambling	8b				
С	Cancellation of debt	8c				
d	Foreign earned income exclusion from Form 2555	8d (	)			
е	Income from Form 8853	8e				
f	Income from Form 8889	8f				
g	Alaska Permanent Fund dividends	8g				
h	Jury duty pay	8h				
i	Prizes and awards	8i				
j	Activity not engaged in for profit income	8j				
k	Stock options	8k				
ı	Income from the rental of personal property if you engaged in the rental					
	for profit but were not in the business of renting such property	81				
m	Olympic and Paralympic medals and USOC prize money (see					
	instructions)	8m				
n	Section 951(a) inclusion (see instructions)	8n				
0	Section 951A(a) inclusion (see instructions)	80				
р	Section 461(I) excess business loss adjustment	8p				
q	Taxable distributions from an ABLE account (see instructions)	8q				
r	Scholarship and fellowship grants not reported on Form W-2	8r				
S	Nontaxable amount of Medicaid waiver payments included on Form					
	1040, line 1a or 1d	8s (	)			
t	Pension or annuity from a nonqualifed deferred compensation plan or					

8t

8u

8z

Total other income. Add lines 8a through 8z . . . . . . . . .

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

a nongovernmental section 457 plan

u Wages earned while incarcerated

**z** Other income. List type and amount:

9

10

Schedule 1 (Form 1040) 2022 Page **2** 

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	2,500.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans	_	
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	_	
İ	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect tax law violations		
		_	
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
_	1041)		
Z	Other adjustments. List type and amount:		
0E		OF	
25 26	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on	26	2,500.
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		∠,300.

#### **SCHEDULE NEC** (Form 1040-NR)

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

2022

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.

Attachment Sequence No.	7B
<u>'</u>	

Name shown on Form 1040-NR Your identifying number AMRITHA SURESH 747-85-6147 Enter amount of income under the appropriate rate of tax. See instructions

Netwood Income under the appropriate rate of tax. See instructions.			(a) 100/	(L) 450/	(a) 200/	(d) Other (specify)			
	Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	%	%	
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations	. [1	1a					
b	Dividends paid by fo	reign corporations	. 1	1b					
С	Dividend equivalent p	ayments received with respect to section 871(m) transactio	ns 1	1c					
2	Interest:								
а	Mortgage		. 2	2a					
b	Paid by foreign corpo	orations	. 2	2b					
С	Other		. 2	2c					
3	Industrial royalties (p	atents, trademarks, etc.)	. $ ag{}$	3					
4	Motion picture or TV	copyright 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	es	. $ ag{}$	7					
8	Social security benef	its	. $\Box$	8					
9	Capital gain from line	e 18 below	. $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	9					
10									
а	Winnings								
b	Losses	<u> </u>	. 1	0с					
11	Gambling winnings – Note: Losses not allo	Residents of countries other than Canada.	1	11					
12	Other (specify):								
			1	12					
13	•	12 in columns (a) through (d)	_	13					
14		ate of tax at top of each column		14					
15	Tax on income not e	fectively connected with a U.S. trade or business. Add co		. ,	• ( )			NR, line 23a <b>15</b>	
		Capital Gains and Losse	es Fro	om :	Sales or Excha	nges 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 effectively connected with a U.S. business. Do not include a gain			(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).
or loss	on disposing of a U.S. real y interest; report these								
	nd losses on Schedule D								
	property sales or								
connec	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16					17	(	
on Schedule D (Form 1040), Form 4797, or both.		18 Capital gain. Combine columns (f) and (g) of line							

#### 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

Name shown on Form 1040-NR Your identifying number AMRITHA SURESH 747-85-6147 Α Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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. Ε immigration status on the last day of the tax year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . . . . . . . . . Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2022. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States Date departed United States mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2020 \_\_\_\_\_\_, 2021 \_\_\_\_\_\_, and 2022 \_\_\_\_\_\_365 \_\_\_. Yes X No Т If "Yes," give the latest year and form number you filed: X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a Yes No Κ Yes X No 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 (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "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 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 . . . . . . . . . . . . . . . . .