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.....

Taxpayer's name		Social secur	ity numb	per
VASUDEVA R	DDY MUTHYALA	686-55	5-203	0
Spouse's name		Spouse's so	cial secu	urity number
Part I Tax	Return Information – Tax Year Ending December 31, 2022 (Ente	r year you a	are au	thorizing.)
Enter whole doll	rs only on lines 1 through 5.			
Note: Form 104	SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted	ross income		1	17,192.
2 Total tax			2	423.
3 Federal ir	come tax withheld from Form(s) W-2 and Form(s) 1099		3	1,797.
4 Amount y	want refunded to you		4	1,374.
5 Amount y	bu owe		5	,

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, 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	I autnorize	GLOBAL	TAXES	ERO firm name	to enter or generate my PIN	E
	I authorize	CT OD AT	TAVEC	TTC	to optox or concrete my DIN	15

5	2	0	3	0	as mv
Ent don	aomy				

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 >	Da	ate 🕨	•			 				
Practitione	r PIN Method Returns Only—continue	belo	w							
Part III Certification and Authenticatio	n – Practitioner PIN Method Only					 				
ERO's EFIN/PIN. Enter your six-digit EFIN follow	ved by your five-digit self-selected PIN.	2	2	 	 6 Iter a	 	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 >	ature Date Date								
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So									
For Denemicarly Deduction Act Nation				Earm 8879 (Bay, 01	2021)				

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/18/23 PRO

E1040)-[Department of the Treasury-Inter U.S. Nonresident A	ernal Rever lien In	nue Service COME TAX I	Return	2022	OMB No. ⁻	545-0074	IRS L or	Jse Only—Do not write staple in this space.
For the year Jar	n. 1–I	Dec. 31, 2022, or other tax year begin	ning		, 2022, e	nding		, 20	-	See separate instructions.
Filing Status Check only		Single Married filing sep you checked the QSS box, enter the c	• •			surviving spouse is a child but not y	()	Endent:	state	Trust
one box.										
Your first name	and	middle initial	Last na	ame				Your i (see in		ifying number
										,
VASUDEVA				IYALA				686	-55	-2030
		ber and street). If you have a P.O. bo WILLOW CIRCLE	x, see ins	structions.						Apt. no.
		ffice. If you have a foreign address, a	lso comr	lete spaces belo			State		710	° code
HERNDON	031 0	nice. Il you have a loreign address, a		nete spaces beit	Jvv.		VA			171
Foreign country	/ nam		Foreia	n province/state/	/county			postal c		
r oroigir oounity	nan		lioreig	in province, state,	oburity		lioreigi	i postal o	ouc	
Digital Assets		any time during 2022, did you: (a) rece erwise dispose of a digital asset (or a								
Dependents	-		manora							ualifies for (see inst.):
(see instructions):				(2) Depende				nild tax cre	í	Credit for other
(000	·	(1) First name Last name	9	identifying nu	mber	(3) Relationship to	/ou O		un	dependents
If more than four										<u> </u>
dependents, see										<u> </u>
instructions and check here										
	4.0			 						
Income	1a ⊾	Total amount from Form(s) W-2, bo		,						17,192.
Effectively	b c	Household employee wages not re Tip income not reported on line 1a								
Connected With U.S.	d	Medicaid waiver payments not repo								
Trade or	e	Taxable dependent care benefits fr							-	
Business	f	•								
Dusiness	g	Employer-provided adoption benefits from Form 8839, line 29							g	
Attach	h	Other earned income (see instructions)							h	
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use						. 1	j	
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fro	m Schec	lule OI (Form 104	10-NR), ite	em L,				
here. Also		line 1(e)				. 1k				
attach	z	Add lines 1a through 1h						. 1	z	17,192.
Form(s) 1099-R if	2a	Tax-exempt interest 2	2a		b Taxa	ble interest		. 2	b	
tax was	3a		la			nary dividends .				
withheld.	4a		a			ble amount				
lf you did not get a Form	5a		ia			ble amount				
W-2, see	6	Reserved for future use								
instructions.	7 8	Capital gain or (loss). Attach Sched Other income from Schedule 1 (For				•			_	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and								17,192.
	10	Adjustments to income:	0. 1113 13						-	
	а	From Schedule 1 (Form 1040), line	26			. 10a				
	b	Reserved for future use								
	c	Reserved for future use								
	d	Enter the amount from line 10a. The						. 10	d	
	11	Subtract line 10d from line 9. This i							1	17,192.
	12	Itemized deductions (from Sched deduction (see instructions).	ule A (Fo	orm 1040-NR)) or	r, for certa	ain residents of In		lard	2	12,950.
	13a	Qualified business income deduction				1 1			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	b									
	c						. 13	sc		
	14									12,950.
	15	Subtract line 14 from line 11. If zero								4,242.
Far Disalaarma		any Act, and Bananyark Badyation Ac			-					

BAA REV 02/18/23 PRO

Form **1040-NR** (2022)

Form 1040-NR (2	2022)						Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 28814 2	4972	3		16	423.
Credits	17	Amount from Schedule 2 (Form 1040), line 3				17	0.
	18	Add lines 16 and 17				18	423.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form	m 1040)			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, enter -0				22	423.
	23a	Tax on income not effectively connected with a U.S. trade or business fro	om				
		Schedule NEC (Form 1040-NR), line 15		a			
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 104	40),				
		line 21	. 23k	b			
	с	Transportation tax (see instructions)	. 230				
	d	Add lines 23a through 23c				23d	
	24	Add lines 22 and 23d. This is your total tax				24	423.
Payments	25	Federal income tax withheld from:					
-	а	Form(s) W-2	. 25a	a 1	,797.		
	b	Form(s) 1099	. 25	b			
	с	Other forms (see instructions)	. 250				
	d	Add lines 25a through 25c				25d	1,797.
	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 8812 (Form 1040)	. 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 15	. 31				
	32	Add lines 28, 29, and 31. These are your total other payments and refu	undable	credits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	s			33	1,797.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the an	mount you	u overpaid		34	1,374.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, of	check he	re	. 🗆	35a	1,374.
Direct deposit?	b	Routing number 1 0 1 0 0 0 4 5 c Type:	🗙 Che	cking	Savings		
See instructions.	d	Account number 5 1 8 0 1 0 6 4 1 0 4 8					
	е	If you want your refund check mailed to an address outside the United S	States no	ot shown on	page 1,		
		enter it here.					
	36	Amount of line 34 you want applied to your 2023 estimated tax .	. 36				
Amount	37	Subtract line 33 from line 24. This is the amount you owe .					
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructio	ons			37	
	38	Estimated tax penalty (see instructions)	. 38				
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See in	nstruction	s. 🗌 Ye	es. Comp	lete belo	w. 🛛 No
Party	Desig				nal identif	ication _Γ	
Designee	name			numbe	, ,	L	
		penalties of perjury, I declare that I have examined this return and accompanying sc they are true, correct, and complete. Declaration of preparer (other than taxpayer) is					
Sign		signature Date Your occupa					nt you an Identity
Here	rour		alion				IN, enter it here
TIELE		SOFTWARE	E ENGI	NEER		inst.)	
	Phone	e no. Email address					
Paid	Prepa	arer's name Preparer's signature	Dat	te	PTIN		Check if:
		SYAM PRIYA RAM SAGAR GUPTA TAL	LAM 03	/05/2023	P02082	2703	Self-employed
Preparer	Firm's	s name SYAMIRATANA STARS GUILE TALLAM			Phone n	0. (67	8)965-9522
Use Only	Firm's	s address 245 ROONEY CT E BRUNSWICK NJ 08816			Firm's E		l-3171965
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information.	RI	EV 02/18/23 PR		Fo	rm 1040-NR (2022)

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NB

Sequence No. 7B Your identifying number

2

Attachment

686-55-2030

Iname shown on i	0111 1040-1	
VASUDEVA	REDDY	MUTHYALA

Enter a	amount of income und	ler the	appropriate rate of tax. See instructions.							
			Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Othe	r (specify)
						(a) 1070	(6) 1370	(0) 50 70	%	%
1	Dividends and divide	end ec	uivalents:							
а	Dividends paid by U.	.S. co	rporations		1a					
b	Dividends paid by fo	paid by foreign corporations								
С	Dividend equivalent p	bayme	nts received with respect to section 871(m) tr	ransactions	1c					
2	Interest:									
а	Mortgage				2a					
b	b Paid by foreign corporations									
С	Other				2c					
3	Industrial royalties (p	patents	s, trademarks, etc.)		3					
4	Motion picture or TV	copy	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 annuities				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	dents 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	effectiv	ely connected with a U.S. trade or busines						-NR, line 23a 15	
			Capital Gains and	LOSSES F	-rom	Sales or Excha	inges of Proper	ту		
losses f exchang within t	nly the capital gains and from property sales or ges that are from sources he 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).
busines	ely connected with a U.S. s. Do not include a gain	<u> </u>								
propert	on disposing of a U.S. real y interest; report these									
gains a (Form 1	nd losses on Schedule D 040).									
Report	property sales or									
	ges that are effectively ted with a U.S. business	17	Add columns (f) and (g) of line 16					17	(
on Sche	edule D (Form 1040),		Capital gain. Combine columns (f) and (g) of line 16				 e and on line 9 ab		N /	
	797, or both.		ice. see the Instructions for Form 1040-NR		. בוונפ	-	02/18/23 PRO			//Farma 4040 NID) 0000
101 62		or not	ise, see the manuchulis full Fullit 1040-INA			112 1			Schedule NEC	(Form 1040-NR) 2022

SCHE	DULE	OI
(Form	1040-1	NR)

Other Information

OMB No. 1545-0074

(Form	1040-NR)	Go t	o www.irs.gov/Form1040N	R for instructions and	the latest information	. [201	>2
	ent of the Treasury Revenue Service			h to Form 1040-NR. wer all questions.			Attachment Sequence N	o. 7C
Name sh	nown on Form 1040)-NR				Your identifyir	ng number	
VASU	DEVA REDDY	MUTHYALA				686-55-2	2030	
Α			vere you a citizen or nation					
В			residence for tax purpose		? United States			
С	Have you ever	applied to be a	green card holder (lawful p	permanent resident) o	f the United States? .		Yes	X No
D	Were you ever:						_	-
	A U.S. citizen?							X No
2.	-	• •	rmanent resident) of the Ur				∐ Yes	🗙 No
_	-	., .	2), see Pub. 519, chapter 4,	•				
Е	If you had a vi immigration sta	sa on the last itus on the last o	day of the tax year, enter day of the tax yearF1	your visa type. If you	didn't have a visa, en	ter your U.S.		
F	Have you ever	changed your v	/isa type (nonimmigrant sta	atus) or U.S. immigrati	on status?		Yes	🛛 No
	If you answere	d "Yes," indicat	e the date and nature of th	e change:				
G	,		left the United States durin	0				
			Canada or Mexico AND con r Mexico and skip to item I			ient intervals,		
		United States dd/yy	Date departed United Stat mm/dd/yy	tes D	ate entered United State mm/dd/yy	s Date dep	oarted Unite mm/dd/yy	d States
		,,,					,,	
н	Give number of	days (including	vacation, nonworkdays, and	d partial days) you wer	e present in the United	States during:		
			, 2021					
I			return for any prior year? . nd form number you filed:					🗌 No
J	Are you filing a	return for a tru	st?	······································			Yes	🗙 No
	If "Yes," did th	e trust have a	U.S. or foreign owner under ribution from a U.S. person	er the grantor trust ru	les, make a distribution	n or loan to a		No
к			sation of \$250,000 or more					
ĸ	-		ative method to determine					
L	Income Exemp	t From Tax-If	f you are claiming exempt	ion from income tax	under a U.S. income			
	,	• • •	. See Pub. 901 for more in					
1.			the applicable tax treaty and the columns below. Attach F			claimed the t	reaty benef	it, and th
		(a) Cou	intry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		mount of exe in current ta	•
	(a) Tatal Cat	r this amount -	n Form 1040 ND line du 5					
0			n Form 1040-NR, line 1k. I preign country on any of the	-			Yes	No
			ts pursuant to a Competen				∐ Yes	
0.			Competent Authority deterr					

- 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 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.