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

- Internal n	evenue del vice						
Submis	ssion Identification Number (SID)						
Taxpayer	's name	Social securi	ty numl	oer			
KISH	OR KUMAR REDDY MUTYALA	780-96-6711					
Spouse's		Spouse's so	ial sec	urity nu	mber		
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re au	thoriz	ing.)		
	hole dollars only on lines 1 through 5.						
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		١.	ı			
	Adjusted gross income		1			646.	
	Total tax		2			756.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			<u>556.</u>	
	Amount you want refunded to you		5			800.	
Part			_	our r	eturr	<u>,, , , , , , , , , , , , , , , , , , ,</u>	
	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)						
to send for any of Agent to paymen authoriz paymen business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected 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 indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment (settlement) date. I also authorize the financial institutions involved in the payment (settlement) ereceive confidential information necessary to answer inquiries and resolve issues related to the payment in Europe (PIN) below is my signature for the income tax return (original or amended) I are Europe (Withdrawal Consent).	ction of the t S. Treasury a cated in the t in to debit the the authoriz ests must b processing o ayment. I fur	ransmis ax prepase entry ation e receif the el	ssion, (designation to this a forevolved no ectronics)	b) the ated Find softwale (cauche (cauche) account (cauche) ater a	reason nancial vare for nt. This ncel) a than 2 nent of hat the	
	ic Funds Withdrawal Consent.				_		
	yer's PIN: check one box only	511.	6	7 1	1		
×	I authorize GLOBAL TAXES LLC to enter or generate r	ř En		digits, b	out	as my	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zer	os		
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Your si	gnature ► Date ►						
Spous	e's PIN: check one box only						
Spous	I authorize to enter or generate r	ny DINI				as my	
	ERO firm name		ter five	digits, b		as IIIy	
	signature on the income tax return (original or amended) I am now authorizing.			r all zer			
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.		_			_	
Spouse	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part I	II Certification and Authentication — Practitioner PIN Method Only						
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	8 9 5	$2 \mid 3$	1 9	8	9	
	= invitint Enter your esk digit Entertailored by your involugit controlled in in	Don't ent	er all ze				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax 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 In	tting this ret	urn in a	accorda	anće v		
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	o So					

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

12(0)222 1

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	nning	, 2022,	ending		, 20		see separate nstructions.
Filing Status		Single Married filing se		•	ng surviving spouse	, ,	Es	tate	☐ Trust
Check only one box.		•			·				
Your first name	e and	middle initial	Last na	ame			Your ic		ing number ons)
KISHOR K	UMAF	R REDDY	MUTY	ALA			780-	-96-6	5711
Home address	(num	ber and street). If you have a P.O. bo	x, see ins	tructions.			•		Apt. no.
1215NW,	23RD	STREET			6				
City, town, or p	oost o	ffice. If you have a foreign address, a	also comp	lete spaces below.		State		ZIP co	ode
CORVALLI	S					OR		9733	30
Foreign countr	y nam	е	Foreign	n province/state/county		Foreign	postal co	de	
Digital Asset		ny time during 2022, did you: (a) receivise dispose of a digital asset (or a					or (b) sell,		
Dependents	s					(4) Cl	neck the bo	x if qual	ifies for (see inst.):
(see instructions		(1) First name Last nam	е	(2) Dependent's identifying number	(3) Relationship to y	ou Ch	ild tax cred	ld tax credit Credi	
If									
If more than fou dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see i	nstructions)			. 1a		37,646.
Effectively	b	Household employee wages not re	ported or	Form(s) W-2			. 1b		
Connected	С	Tip income not reported on line 1a	(see instr	ructions)			. 1c		
With U.S.	d	Medicaid waiver payments not rep	orted on F	Form(s) W-2 (see instruc	tions)		. 1d		
Trade or	е	Taxable dependent care benefits f	rom Form	2441, line 26			. 1e		
Business	f	Employer-provided adoption bene	fits from F	orm 8839, line 29 .			. 1f		
	g	Wages from Form 8919, line 6 .					. 1g		
Attach Form(s) W-2,	h	Other earned income (see instruction	ons) .		<u> </u>		. 1h		
1042-S,	i	Reserved for future use							
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	om Sched	lule OI (Form 1040-NR),	item L,				
here. Also		line 1(e)			1k				
attach	Z	Add lines 1a through 1h	. , .				. 1z		37,646.
Form(s) 1099-R if	2a	Tax-exempt interest	2a	b Tax	kable interest		. 2b		
tax was	3a	Qualified dividends	3a	b Ord	dinary dividends .		. 3b		
withheld.	4a	IRA distributions	4a	b Tax	kable amount		. 4b		
If you did not	5a	Pensions and annuities	5а	b Tax	kable amount		. 5b		
get a Form W-2, see	6	Reserved for future use					. 6		
instructions.	7	Capital gain or (loss). Attach Scheo	dule D (Fo	rm 1040) if required. If n	ot required, check h	ere	□ 7		
	8	Other income from Schedule 1 (Fo	rm 1040),	line 10			. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	d 8. This is	your total effectively o	onnected income		. 9		37,646.
	10	Adjustments to income:							
	а	From Schedule 1 (Form 1040), line	26		10a				
	b	Reserved for future use			10b				
	С	Reserved for future use			10c				
	d	Enter the amount from line 10a. Th	ese are yo	our total adjustments t	o income		. 100	ŀ	
	11	Subtract line 10d from line 9. This	. 11		37,646.				
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)							12,950.
	13a	Qualified business income deducti			1 1	,	eaty 12		
	b	Exemptions for estates and trusts							
	С	Add lines 13a and 13b					. 130		
	14								12 050
	15	Subtract line 14 from line 11. If zer							12,950. 24,696.
	10		U UI 1688.	enter -o-, mile is vour ta	AADIC IIICUIIIC .		. 10	1	4 4 ,090.

Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): 1 🗌 88	2 2 4 97	2 3 \square		16	2,756.
Credits	17	Amount from Schedule 2 (Form 1040), line	3				17	0.
	18	Add lines 16 and 17					18	2,756.
	19	Child tax credit or credit for other dependent	ents from Schedi	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 zero or les	s, enter -0				22	2,756.
	23a	Tax on income not effectively connected v Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment to line 21	•	, , , , , , , , , , , , , , , , , , , ,	23b			
	С	Transportation tax (see instructions) .			23c			
	d	Add lines 23a through 23c				2	23d	
	24	Add lines 22 and 23d. This is your total ta	х				24	2,756.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 4	1,556.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				2	25d	4,556.
	е	Form(s) 8805				2	25e	
	f	Form(s) 8288-A				2	25f	
	g	Form(s) 1042-S					25g	
	26	2022 estimated tax payments and amount	applied from 20	21 return	<u></u>		26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedule 8	3812 (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 t	otal other paym	ents and refunda	ble credits	;	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32.	These are your to	tal payments .		;	33	4,556.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33.	This is the amoun	t you overpaid		34	1,800.
	35a	Amount of line 34 you want refunded to y		is attached, chec	k here	. 🗌 🔄	85a	1,800.
Direct deposit?	b	Routing number 3 2 5 0 7 0	Savings					
See instructions.	d	Account number 8 3 8 5 9 2	9 6 9					
	е	If you want your refund check mailed to a	n address outsid	e the United State	es not shown on	page 1,		
		enter it here.			,			
	36	Amount of line 34 you want applied to yo			36			
Amount	37	Subtract line 33 from line 24. This is the a	mount you owe.					
You Owe		For details on how to pay, go to www.irs.g					37	
	38	Estimated tax penalty (see instructions)			38			
Third	Do yo	u want to allow another person to discuss t	his return with th	ie IRS? See instru	ctions.	es. Complete	below.	⊠ No
Party Designee	Desig name	nee's 	Phone no.			nal identifica er (PIN)	tion	
_		penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration						
Sign	Your	signature	Date	Your occupation		If the IF	RS sent yo	ou an Identity
Here				•				enter it here
				POSTDOCTOR	AL SCHOLAR	R (see ins	st.)	
	Phone		Email address			DTIN	1	
Paid	Prepa	· .	's signature		Date	PTIN		ck if:
Preparer			RIYA RAM SAGAF	R GUPTA TALLAM	03/31/2023	P020827	03 🗀	Self-employed
Use Only		name GLOBAL TAXES LLC				Phone no.		965-9522
y	Firm's	address 245 DOONEY OF F DI	DITATOMITON NO	T 00016		Firm's FIN	84-3	171965

Form 1040-NR (2022)

SCHEDULE NEC (Form 1040-NR)

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

Department of the Treasury Internal Revenue Service

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

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

2022
Attachment Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number KISHOR KUMAR REDDY MUTYALA 780-96-6711

Nature of Income			(a) 10% (b)	(b) 15%	(c) 30%	(d) Other (specify)		
				(b) 13%	(6) 30%	%	%	
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations	1a						
b	Dividends paid by foreign corporations							
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c						
2	Interest:							
а	Mortgage	2a						
b	Paid by foreign corporations							
С	Other	2c						
3	Industrial royalties (patents, trademarks, etc.)	3						
4	Motion picture or TV copyright royalties	4						
5	Other royalties (copyrights, recording, publishing, etc.)	5						
6	Real property income and natural resources royalties	6						
7	Pensions and annuities	7						
8	Social security benefits							
9	Capital gain from line 18 below							
10	10 Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0							
	•							
a b	Winnings	10c						
11	Losses	100						
•••	Note: Losses not allowed	11						
12	Other (specify):							
		12						
13	Add lines 1a through 12 in columns (a) through (d)	13						
14	Multiply line 13 by rate of tax at top of each column	14						
15	Tax on income not effectively connected with a U.S. trade or business. Add column					NR, line 23a 15		
	Capital Gains and Losses F	rom	Sales or Excha	nges of Proper	ty			
losses f exchang within t	nly the capital gains and rom property sales or ges that are from sources the United States and not the capital gains and comproperty sales or ges that are from sources the United States and not the capital gains and growing the capital gains and		(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 y interest; report these							
gains a	nd losses on Schedule D							
(Form 1	·							
exchan	property sales or ges that are effectively							
						()		
	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		

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name sl	Name shown on Form 1040-NR Your identifying number									
KISH	OR KUMAR REDDY MUTYA	ALA			780-96-67	711				
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		☐ Yes	⊠ No						
D	Were you ever:									
	A U.S. citizen?			⊠ No						
2.	A green card holder (lawful per	,				∐ Yes	⊠ No			
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
E	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. J1									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	eft the United States durin	g 2022. See instruc	tions.						
	Note: If you're a resident of C check the box for Canada or				ient intervals,					
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Date entered United State mm/dd/yy		rted United nm/dd/yy	States			
Н	Give number of days (including									
	2020	, 2021	, and :	2022365	·					
ı	Did you file a U.S. income tax If "Yes," give the latest year ar	d form number you filed:				∐ 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					Yes	☐ No			
K	Did you receive total compens	ation of \$250,000 or more	during the tax year?	?		☐ Yes	⊠ No			
	If "Yes," did you use an alterna					_	☐ 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, amount of exempt income in the				claimed the tre	aty benefit,	and the			
	(a) Cou	ntry	(b) Tax treaty article		, ,	ount of exen				
				claimed in prior tax ye	ears income in	n current tax	year			
	(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it anywh	nere else on line 1						
2.	Were you subject to tax in a fo		-			Yes	☐ No			
3.	Are you claiming treaty benefit	s pursuant to a Competent	Authority determin	ation?		☐ Yes	X No			
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to you	ur return.						
M	Check the applicable box if:									
1.	This is the first year you are may with a U.S. trade or business u						nnected . \square			
2.	You have made an election in States as effectively connected									
					÷					