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

| IIILEIIIAI F | leveliue Selvice | | | | | | |
|---|---|---|---|---|---|--|--|
| Submis | ssion Identification Number (SID) | | | | | | |
| Taxpaye | r's name | Social securi | ty numi | per | | | |
| KISE | IOR KUMAR REDDY MUTYALA | 780-96-6711 | | | | | |
| Spouse's | | Spouse's soc | | | nber | | |
| | | | | | | | |
| Part | Tax Return Information — Tax Year Ending December 31, 2022 (Enter | year you a | re au | thorizi | ng.) | | |
| | whole dollars only on lines 1 through 5. | | | | | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | 1 | ı | | | |
| | Adjusted gross income | | 1 | | | 546. | |
| 2 | 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 | | 4 | | 1, | <u>800.</u> | |
| 5 Part | Amount you owe | | 5 | OUR P | sturr | <u>,, </u> | |
| | penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) | | | | | <u> </u> | |
| to send for any Agent to payment authorize payment business taxes to personal | original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmismy 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 action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, 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 confidential information necessary to answer inquiries and resolve issues related to the payment is funded withdrays (Consent). | ction of the ti S. Treasury a cated in the ti n to debit the the authorizates must be processing or ayment. I fur | ransmis nd its of ax prepare entry ation. The receifther action at the electric entry at the electric entry at the electric entry action. | ssion, (k designa paration to this a To revol ved no ectronic knowle | the ted Fi softwaccoulke (ca later payr dge t | reason nancial vare for nt. This ncel) a than 2 nent of nat the | |
| | nic Funds Withdrawal Consent. | | | | _ | | |
| | yer's PIN: check one box only | 6 | 6 | 7 1 | 1 | | |
| X | l authorize GLOBAL TAXES LLC to enter or generate i | ř En | | digits, b | ut | as my | |
| | signature on the income tax return (original or amended) I am now authorizing. | do | n't ente | r all zer | os | | |
| | 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. | | | | | | |
| Your si | gnature ► Date ► _ | | | | | | |
| Spous | e's PIN: check one box only | | | | _ | | |
| | I authorize to enter or generate | nv PIN | | | | as my | |
| | ERO firm name | , | ter five | digits, b | | , | |
| | signature on the income tax return (original or amended) I am now authorizing. | do | n't ente | r all zer | os | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology. | | _ | | | _ | |
| Spouse | e's signature ▶ Date ▶ | | | | | | |
| | Practitioner PIN Method Returns Only—continue below | | | | | | |
| Part I | Certification and Authentication — Practitioner PIN Method Only | | | | | | |
| ERO's | EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1 | 8 9 5 | 2 3 | 1 9 | 8 | 9 | |
| | | Don't ent | er all ze | eros | | | |
| authoriz | that the above numeric entry is my PIN, which is my signature for the electronic individual income taged to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submenents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Incompany IRS e-file Providers of Inco | tting this retu | ırn in a | accorda | nće 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 | lit (| Credit for other dependents |
| 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 instructions) | | | | | | | |
| 1042-S, | i | Reserved for future use | | | 1i | | | | |
| 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 | | | | | | | 12,950. |
| | 13a | | | | | | | | |
| | 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 | Aabie iiicullie . | | . 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 | | |
| 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) 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 | | | | | | | |
| 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 | | | | | | | | | |
| F | Have you ever changed your v If you answered "Yes," indicate | | | ation status? | | ∐ Yes | ⊠ No | | | |
| 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 count 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 | | | | | | | | | |
| | | | | | ÷ | | | | | |