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.

Submission Identification Number (SID)

| Taxpayer's name | Social security number | | | | | |
|-----------------------------------------------------------------------------------------------------------|---------------------------------|--|--|--|--|--|
| DAMINI CHITTEM | 368-59-9705 | | | | | |
| Spouse's name | Spouse's social security number | | | | | |
| Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter | year you are authorizing.) | | | | | |
| 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 23,172. | | | | | |
| 2 Total tax | 2 1,023. | | | | | |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | . 3 3,021. | | | | | |
| 4 Amount you want refunded to you | 4 1,998. | | | | | |
| 5 Amount you owe | 5 | | | | | |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) | | | | | | |

Under penalties of perjury, 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

| | | | | EBO firm name | 6 , | E |
|---|-------------|--------|-------|---------------|-----------------------------|---|
| X | l authorize | GLOBAL | TAXES | LLC | to enter or generate my PIN | |

| Ent dor | as my | | | | |
|------------|-------|---|---|---|--|
| 9 | 9 | 7 | 0 | 5 | |

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 my 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 | ate | | | | | | | |
|-------------------------------------------------------------------------------------------------|-----|----|---|--|---|---------|---|--|
| Practitioner PIN Method Returns Only—continue | bel | ow | | | | | | |
| Part III 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 | | 6 | 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 | re ► Date ► | | | | | | |
|---------------------------------------------------------------------|-------------|------------------|--------------------------|--|--|--|--|
| ERO Must Retain Th Don't Submit This Form to t | | | | | | | |
| For Paperwork Reduction Act Notice, see your tax return instruction | ons. BAA | REV 02/18/23 PRO | Form 8879 (Rev. 01-2021) | | | | |

| 104 |)- | Department of the Treasury-Inter U.S. Nonresident Al | rnal Rever ien In | nue Service COME TAX F | Return | 2022 | OMB No | o. 1545-007 | 4 | S Use Only—Do not write or staple in this space. |
|--------------------------------------------|--------|-----------------------------------------------------------------------------------|------------------------|---------------------------|-------------------|------------------------------------------|----------|---------------|--------|--------------------------------------------------|
| | | Dec. 31, 2022, or other tax year beginr | | | | | | | | See separate instructions. |
| Filing Status Check only one box. | | Single Married filing sep. | • • | , | | g surviving spouse is a child but not | | | Esta | ite 🗌 Trust |
| Your first name | and | middle initial | Last na | ame | | | | | | ntifying number uctions) |
| DAMINI | | | CHIT | ͲEM | | | | | | 59 - 9705 |
| | (num | ber and street). If you have a P.O. box | • | | | | | | 0 0 | Apt. no. |
| 118 LOFT | C HE | IGHTS DRIVE | | | | | | | | |
| City, town, or p | oost o | ffice. If you have a foreign address, al | so comp | lete spaces belo | w. | | State |) | Z | IP code |
| DURHAM | | | 1 | | | | NC | | 2 | 27713 |
| Foreign countr | y nam | le | Foreig | n province/state/ | county | | Forei | gn postal | cod | e |
| Digital Asset | At a | ny time during 2022, did you: (a) rece erwise dispose of a digital asset (or a | ive (as a financial | reward, award, c | or payme | nt for property or a | | s); or (b) se | ell, e | xchange, gift, or . 🗌 Yes 🔀 No |
| Dopondonte | - | | | | | | | | | f qualifies for (see inst.): |
| Dependents (see instructions) | | | | (2) Depender | | | | Child tax c | | Credit for other |
| ,500 | - | (1) First name Last name | | identifying nur | nber | (3) Relationship to | you | | eult | dependents |
| If more than fou | .— | | | | | | | | | |
| dependents, see | | | | | | | | | | |
| instructions and check here | | | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, box | x 1 (see i | Instructions) | | | | | 1a | 23,172. |
| Effectively | b | Household employee wages not rep | • | , | | | | | 1b | 2071721 |
| Connected | С | Tip income not reported on line 1a (| | | | | | | 1c | |
| With U.S. | d | Medicaid waiver payments not repo | | | | | | | 1d | |
| Trade or | е | Taxable dependent care benefits fro | om Form | 2441, line 26 . | | | | [| 1e | |
| Business | f | Employer-provided adoption benefi | ts from F | orm 8839, line 2 | 9 | | | 🗋 | 1f | |
| Attach | g | Wages from Form 8919, line 6 | | | | | | | 1g | |
| Form(s) W-2, | h | Other earned income (see instructio | | | | | | | 1h | |
| 1042-S, SSA-1042-S, | i | Reserved for future use | | | | . <u>1i</u> | | | 41 | |
| RRB-1042-S, | J | Reserved for future use | | | · · · | | • • | · · | 1j | |
| and 8288-A | K | Total income exempt by a treaty fro line 1(e) | | | | | | | | |
| here. Also attach | z | Add lines 1a through 1h | | | | . 1k | | | 1z | 23,172. |
| Form(s) | 2a | Tax-exempt interest 2 | 1 | | b Таха | able interest | | | 2b | 207172. |
| 1099-R if tax was | 3a | Qualified dividends 3 | | | | nary dividends . | | - | 3b | |
| withheld. | 4a | IRA distributions 4 | | | | able amount | | - | 4b | |
| If you did not | 5a | Pensions and annuities 5 | a | | b Taxa | able amount | | [| 5b | |
| get a Form W-2, see | 6 | Reserved for future use | | | | | | | 6 | |
| instructions. | 7 | Capital gain or (loss). Attach Sched | | , , | | • | | | 7 | |
| | 8 | Other income from Schedule 1 (For | | | | | | | 8 | |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and | 8. This is | s your total effec | tively co | nnected income | · · | · · | 9 | 23,172. |
| | 10 | Adjustments to income: | 06 | | | 10- | | | | |
| | a b | From Schedule 1 (Form 1040), line 2 Reserved for future use | | | | | | | | |
| | b C | Reserved for future use | | | | | | | | |
| | d | Enter the amount from line 10a. The | | | | | | | 0d | |
| | 11 | Subtract line 10d from line 9. This is | | - | | | | - | 11 | 23,172. |
| | 12 | Itemized deductions (from Schedu deduction (see instructions) | ule A (Fo | rm 1040-NR)) or | , for certa | ain residents of In | | Indard | 12 | 12,950. |
| | 13a | Qualified business income deductio | | | | 1 1 | | 1 | | ±2;550. |
| | b | Exemptions for estates and trusts o | | | | | | | | |
| | c | Add lines 13a and 13b | | | | | | | 13c | |
| | 14 | Add lines 12 and 13c | | | | | | [| 14 | 12,950. |
| | 15 | Subtract line 14 from line 11. If zero | or less, | enter -0 This is | your tax | able income | | [| 15 | 10,222. |
| For Disclosure | Priva | cy Act, and Paperwork Reduction Ac | t Notice, | see separate ins | tructions | BAA | REV 02/1 | 8/23 PRO | F | orm 1040-NR (2022) |

| Form 1040-NR (| 2022) | | | | | Page 2 |
|-------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------|---------------|----------------|
| Tax and | 16 | Tax (see instructions). Check if any from Form(s): 1 28814 2 497 | 2 3 🗌 | | 16 | 1,023. |
| Credits | 17 | Amount from Schedule 2 (Form 1040), line 3 | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | 18 | 1,023. |
| | 19 | Child tax credit or credit for other dependents from Schedule 8812 (Form 10 | , | | 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 | 1,023. |
| | 23a | Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15 | 23a | | | |
| | b | Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21 | 23b | | | |
| | с | Transportation tax (see instructions) | 23c | | | |
| | d | Add lines 23a through 23c | | | 23d | |
| | 24 | Add lines 22 and 23d. This is your total tax | <u></u> | | 24 | 1,023. |
| Payments | 25 | Federal income tax withheld from: | | | | |
| | а | Form(s) W-2 | 25a 3 | ,021. | | |
| | b | Form(s) 1099 | 25b | | | |
| | С | Other forms (see instructions) | 25c | | | |
| | d | Add lines 25a through 25c | | | 25d | 3,021. |
| | 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 | | 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 refunda | | 1 | 32 | 2 001 |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments . | | | 33 34 | 3,021. |
| Refund | 34 35a | If line 33 is more than line 24, subtract line 24 from line 33. This is the amour Amount of line 34 you want refunded to you . If Form 8888 is attached, chec | | 1 | 34 35a | 1,998. |
| Direct deposit? | зэа b | · · · · · · · · · · · · · · · · · · · | _ | Savings | SSA | 1,998. |
| See instructions. | d b | Account number 3 4 3 9 4 5 4 7 6 4 | | Savings | | |
| | e u | If you want your refund check mailed to an address outside the United State | | nago 1 | | |
| | | enter it here. | 1 | paye 1, | | |
| | 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 | 00 | For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions. | | | 37 | |
| | 38 | Estimated tax penalty (see instructions) | 38 | | ete below. | X No |
| Third Party | | bu want to allow another person to discuss this return with the IRS? See instru | | | | |
| Designee | Desig name | 80 | Persor numbe | al identific r (PIN) | cation | |
| | Under | penalties of perjury, I declare that I have examined this return and accompanying schedu | iles and statements | , and to the | | |
| Sign | | they are true, correct, and complete. Declaration of preparer (other than taxpayer) is base | ed on all information | | • | , , |
| Here | Your | signature Date Your occupation | NCINEED | Prote | ection PIN, e | ou an Identity |
| | Dhair | SOFTWARE E | NGINEEK | (see i | nsi.) | |
| | Phone | e no. Email address arer's name Preparer's signature | Date | PTIN | Che | |
| Paid | 1.000 | SYAM PRIYA RAM SAGAR GUPTA TALLAM | | P02082 | | Self-employed |
| Preparer | Firm' | SIAM FRITA AM SAGAR GUFTA TALLAM | 00/10/2020 | Phone no | | 965-9522 |
| Use Only | | s address 245 ROONEY CT E BRUNSWICK NJ 08816 | | Firm's Ell | (0/0/3 | 171965 |
| Go to www.irs. | | rm1040NR for instructions and the latest information. | REV 02/18/23 PR0 | | | 040-NR (2022) |

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.



Name shown on Form 1040-NR

DAMINI CHITTEM

Your identifying number

368-59-9705

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

| Nature of Income | | | (a) 10% | (1-) 1 5 0/ | (-) 200/ | (d) Other | (specify) | |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------------------------|---------------------|--------------------------------|----------------------------------------------------------------|----------------------------------------------------------------|--|
| | Nature of income | | (a) 10% | (b) 15% | (c) 30% | % | % | |
| 1 | Dividends and dividend equivalents: | | | | | | | |
| а | Dividends paid by U.S. corporations | 1a | | | | | | |
| b | Dividends paid by foreign corporations | 1b | | | | | | |
| с | Dividend equivalent payments received with respect to section 871(m) transactions | 1c | | | | | | |
| 2 | Interest: | | | | | | | |
| а | Mortgage | 2a | | | | | | |
| b | Paid by foreign corporations | 2b | | | | | | |
| 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 | 8 | | | | | | |
| 9 | Capital gain from line 18 below | 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 | Gambling winnings—Residents of countries other than Canada. 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 exchan | Inly the capital gains and rrom 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). | |
| | ely connected with a U.S. s. Do not include a gain | | | | | | | |
| or loss | on disposing of a U.S. real | | | | | | | |
| gains a | y interest; report these 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 | 7. Ente | er the net gain here | e and on line 9 abo | ove. If a loss, ente | r-0 18 | | |

| SCHE | DUL | E | OI |
|-------|------|----|----|
| (Form | 1040 | -N | R) |

Other Information

OMB No. 1545-0074

| (Form 1040-NR) | | Go to www.irs.gov/Form1040NR for instructions and the latest information. | | | | | 200 00 | |
|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------|---------------------------------------------|----------------------------------------|-------------------------------------------------|--------------|
| Department of the Treasury Internal Revenue Service | | Answer all questions. | | | | | Attachment | |
| | | | | | | | Sequence No. 7C | |
| Name shown on Form 1040-NR | | | | | Your identifying number | | | |
| | NI CHITTEM | | | 368-59-9705 | | | | |
| Α | Of what country or countries were you a citizen or national during the tax year? INDIA | | | | | | | |
| В | In what country did you claim residence for tax purposes during the tax year? United States | | | | | | | |
| C | Have you ever applied to be a green card holder (lawful permanent resident) of the United States? | | | | | | | X No |
| D | Were you ever: A U.S. citizen? | | | | | | | No |
| | A O.S. Citizen? | | | | | | | |
| ۷. | | | es" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. | | | | | X No |
| Е | 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 tay year π^{-1} | | | | | | | |
| F | Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? | | | | | | | |
| | 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, | | | | | | | |
| | check the box | for Canada o | r Mexico and skip to item I | <u> </u> | 🗌 Canada | Mexico | | |
| | | United States | Date departed United Stat | es Da | ate entered United State | s Date dep | parted United | d States |
| | | dd/yy | mm/dd/yy | | mm/dd/yy | | mm/dd/yy | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| н | | | vacation, nonworkdays, and , 2021 | | | | | |
| I. | Did you file a U | .S. income tax | return for any prior year? | | | ······································ | Yes | 🗙 No |
| | If "Yes," give th | ne latest year a | nd form number you filed: | | | | | |
| J | If "Yes," give the latest year and form number you filed: Are you filing a return for a trust? | | | | | | | |
| | If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person? | | | | | | | |
| К | • | | sation of \$250,000 or more ative method to determine | | | | | 🔀 No 🗌 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, the applicable tax treaty article, the number of months in prior years you claimed 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 month claimed in prior tax ye | | (d) Amount of exempt income in current tax year | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 | | | | | | | |
| 2. | 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? | | | | | | | No |
| | • • | you claiming treaty benefits pursuant to a Competent Authority determination? | | | | | | XNo |
| | If "Yes," attach | a copy of the | Competent Authority deterr | mination letter to your | return. | | | |
| Μ | Check the app | licable 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

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/18/23 PRO Schedule OI (Form 1040-NR) 2022