### 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

	1.07.07.00			
Submi	ssion Identification Number (SID)			
Taxpaye	r's name	Social securi	ty numl	per
PALI	AVI REDDY GADDAM	743-33	-353	5
Spouse's	s name	Spouse's soo	ial sec	urity number
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r voar vou a	ro all	thorizing \
	whole dollars only on lines 1 through 5.	i yeai you a	i e au	uionzing.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	21,525
2	Total tax		2	751
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	658
4	Amount you want refunded to you		4	000
5	Amount you owe		5	93
Part		кеер а сор	y of y	our return)
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abourginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transn my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectly in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income to fine the decironic funds withdrawal (direct debit) entry to the financial institution account income to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received confidential information necessary to answer inquiries and resolve issues related to the aligned information number (PIN) below is my signature for the income tax return (original or amended) I and Financial Withdrawal Consent.	ve are the am- nitter, or electro- ection of the to J.S. Treasury a licated in the to on to debit the e the authoriza- uests must be processing of payment. I fur	ounts on ounts	from the income to turn originator (ER ssion, (b) the reas designated Finance paration software to this account. To revoke (cancel ved no later than ectronic payment cknowledge that to
	yer's PIN: check one box only			
X		my PIN 3	3 .	5 3 5 as m
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er 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 metholow.			
Your s	ignature ▶ Date ▶			
Snous	e's PIN: check one box only			
Ороцо	I authorize to enter or generate	my PIN		as m
	ERO firm name	_	ter five	digits, but
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er 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 metholow.			
Spous	e's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below	1		
Part I	Certification and Authentication — Practitioner PIN Method Only			
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2		6 0	8 2 7 1
		Don't ent	er all Ze	er us
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted 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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of I	nitting this retu	ırn in a	accordance with t
ERO's	signature ▶ Date ▶			
	ERO Must Retain This Form — See Instructions			
	Don't Submit This Form to the IRS Unless Requested To	Do So		

Form 1040-V (2022) 2023 Page **2** 

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2023** 

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2023

### Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

Write your social security number (SSN) on your check or money order.

Enter the amount of your payment . . . . . ▶ 93.

REV 02/11/24 PRO 1555

PALLAVI REDDY GADDAM

6324 TURIN LANE ROUND ROCK TX 78665 INTERNAL REVENUE SERVICE P.O. BOX 1303 CHARLOTTE, NC 28201-1303

# E1040-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	.0	See separate instructions.
Your first name	and i	niddle initial	Last na	ame			Your iden	tifying number
							(see instru	ctions)
PALLAVI I	REDI	Υ	GADD	AM			743-3	3-3535
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
6324 TUR	N I	ANE						
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
ROUND ROO	CK					TX	7	8 6 6 5
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign po	ostal code	
Filing		Single	aratelv (N	∕/IFS) ☐ Qualifvi	ng surviving spouse (0	OSS)	☐ Estat	e 🗌 Trust
Status		you checked the QSS box, enter the			0 , ,	,		
Check only		,		1 , 01	ĺ	•		
one box.			. ,					
Digital Assets		ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a t					(b) sell, exc	
Dependents		(e. a.						qualifies for (see inst.):
(see instructions)				(2) Dependent's			tax credit	Credit for other
(occ mon donone)		(1) First name Last name		identifying number	(3) Relationship to you	ı Cillia	- Lax Credit	dependents
If more than four							<u> </u>	
dependents, see							<u> </u>	
instructions and								
check here	<u> </u>							
Income	1a	Total amount from Form(s) W-2, box	•	,			1a	24,025.
Effectively	b	Household employee wages not rep		` '			1b	
Connected	C	Tip income not reported on line 1a (		,			1c	
With U.S.	d	Medicaid waiver payments not repo		` ' '	,		1d	
Trade or	e •	Taxable dependent care benefits from Employer-provided adoption benefit		•			1e 1f	
Business	f	Wages from Form 8919, line 6		·				
Attach	g h	Other earned income (see instruction					1g 1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	,				111	
SSA-1042-S,	i	Reserved for future use					1j	
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		.,	
and 8288-A here. Also		line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	24,025.
Form(s)	2a	Tax-exempt interest 2	1	1	kable interest		2b	·
1099-R if tax was	За	Qualified dividends 3a	а	<b>b</b> Ord	dinary dividends		3b	
withheld.	4a	IRA distributions 4a		<b>b</b> Tax	kable amount		4b	
If you did not	5a	Pensions and annuities 5a	а	<b>b</b> Tax	kable amount		5b	
get a Form W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	ule D (Fo	rm 1040) if required. If n	ot required, check her	e 🗆	7	
	8	Additional income from Schedule 1	(Form 10	040), line 10			8	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your <b>total effectively o</b>	onnected income .		9	24,025.
	10	Adjustments to income from Schedincome	•	•	•		0   10	2 <b>,</b> 500.
	11	Subtract line 10 from line 9. This is y	our <b>adj</b> u	usted gross income			11	21,525.
	12	Itemized deductions (from Schedu						
		deduction (see instructions)			Std Dedn US/Ir	ndia Trea	ty <b>12</b>	13,850.
	13a	Qualified business income deductio	n from F	orm 8995 or Form 8995	-A . <b>13a</b>			
	b	Exemptions for estates and trusts o	nly (see i	instructions)	13b			
	С	Add lines 13a and 13b					13c	
	14							13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	7 <b>,</b> 675.

Form 1040-NR (2	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): <b>1</b>	314 <b>2</b> 🗌	4972	3 🗌		16		768.
Credits	17	Amount from Schedule 2 (Form							17		0.
	18	Add lines 16 and 17							18		768.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Forn	n 1040)			19		
	20	Amount from Schedule 3 (Form	1040), line	8					20		17.
	21	Add lines 19 and 20							21		17.
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22		751.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business fro	om					
		Schedule NEC (Form 1040-NR),	line 15 .			. 23	a				
	b	Other taxes, including self-empl	oyment ta	x, from Schedule	e 2 (Form 104	0),					
		line 21				. 23	b				
	С	Transportation tax (see instruction	ons)			. 23	c				
	d	Add lines 23a through 23c							23d		
	24	Add lines 22 and 23d. This is yo	ur <b>total ta</b>	x		<u> </u>			24		751.
<b>Payments</b>	25	Federal income tax withheld from	m:								
	а	Form(s) W-2					a	658.			
	b	Form(s) 1099				. 25	b				
	С	Other forms (see instructions) .					_				
	d	Add lines 25a through 25c							25d		658.
	е	Form(s) 8805							25e		
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments ar	nd amount	applied from 20	22 return				26		
	27	Reserved for future use					7				
	28	Additional child tax credit from S		` '							
	29	Credit for amount paid with Forr									
	30	Reserved for future use							_		
	31	Amount from Schedule 3 (Form									
	32	Add lines 28, 29, and 31. These							32		
	33	Add lines 25d, 25e, 25f, 25g, 26							33		658.
Refund	34	If line 33 is more than line 24, su					=		34		
5	35a	Amount of line 34 you want <b>refu</b>							35a		
Direct deposit? See instructions.	b	Routing number X X X X			1 11 1		ecking $\Box$	Savings			
	d	Account number X X X X									
	е	If you want your refund check m									
	26	enter it here.	liad ta va	2024 ootimat		. 3					
Amount	36 37	Amount of line 34 you want app Subtract line 33 from line 24. Th			зи	.   3	9				
Amount You Owe	31	For details on how to pay, go to		=	see instructio	ns			37		93.
rou Owe	38	Estimated tax penalty (see instru	_	-		. 3			01		73.
Third		ou want to allow another person to						es. Comp	lete be	low	⊠ No
Party	Desig	·	diocaco t	Phone		ioti dotio		nal identi			
Designee	name			no.				er (PIN)	ilcation		
	Under	penalties of perjury, I declare that I ha they are true, correct, and complete. I	ve examine	d this return and ac			and statement	s, and to tl			
Sign		signature		Date	Your occupa						u an Identity
Here	ı oui	oignataro		Date	rour occupa	111011				,	nter it here
					STUDENT			(see	inst.)		
	Phone	e no.		Email address							
Paid	Prepa	rer's name	Preparer	's signature		Da	ate	PTIN		Chec	k if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	IYA RAM SAGAF	GUPTA TALI	LAM 02	/20/2024	P0208	2703	S	elf-employed
•	Firm's	s name GLOBAL TAXES	LLC					Phone r	no. (6	78)9	65-9522
Use Only	Eirm'	address 045 DOOMBY 6	,m n n	NI NI OLI TOTI NI	T 00016	· -		Eirm'o E	INI O	1 21	71065

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## SCHEDULE 1 (Form 1040)

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

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

PALLAVI REDDY GADDAM

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR.

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

	Sequence No. <b>01</b>
Your soc	ial security number
743-33	-3535

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 E .	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		
I	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			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente 1040, 1040-SR, or 1040-NR, line 8			

Schedule 1 (Form 1040) 2023 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		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
ı	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		
	Housing deduction from Form 2555	-	
J k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	-	
N	1041)		
z	Other adjustments. List type and amount:		
~	04-		
25	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		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	2,500.
			.,

## SCHEDULE 3 (Form 1040)

**Additional Credits and Payments** 

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.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR PALLAVI REDDY GADDAM

Your social security number 743-33-3535

Par	t Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, Form 2441	line 11. Attach	2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	17.
5a	Residential clean energy credit from Form 5695, line 15		5a	
b	Energy efficient home improvement credit from Form 5695, line 32		5b	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	Sa		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	Sc		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Reserved for future use	Se		
f	Clean vehicle credit. Attach Form 8936	Sf .		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	ôj <u> </u>		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
ı	Amount on Form 8978, line 14. See instructions	6I		
m	Credit for previously owned clean vehicles. Attach Form 8936 .	m		
z	Other nonrefundable credits. List type and amount:			
		Sz		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10-	40, 1040-SR, or		
	1040-NR, line 20		8	
		(0)	או ונוו ועל	su on paye 2)

Schedule 3 (Form 1040) 2023 Page **2** 

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions)			10	
11	Excess social security and tier 1 RRTA tax withheld			11	
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
а	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
Z	Other payments or refundable credits. List type and amount:	13z			
14	Total other payments or refundable credits. Add lines 13a through	13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-	-	15	

#### **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

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number PALLAVI REDDY GADDAM 743-33-3535 Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Othe	r (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 – Residents of countries other than Canada.  Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):	10					
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			I. Enter the total here	and on Form 1040	-NR. line 23a <b>15</b>	
	Capital Gains and Losses					,	
losses t	nly the capital gains and from property sales or ges that are from sources the United States and not (if necessary, attach statement of descriptive details not shown below) (b) Date accomm/dd/y	quired	(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).
	rely connected with a U.S. ss. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	ry interest; report these nd losses on Schedule D						
(Form 1	,						
exchan	property sales or ges that are effectively						
	ted with a U.S. business edule D (Form 1040),				17		
	18 Capital gain. Combine columns (f) and (g) of line 1	7. Ent	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 <b>18</b>	

## SCHEDULE OI (Form 1040-NR)

**Other Information** 

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Name	e shown on Form 1040-NR			our identifying r	number	
PA:	LLAVI REDDY GADDAM			743-33-35	35	
Α	Of what country or countries were you a citizen or national	during the tax year? IN	IDIA			
В	In what country did you claim residence for tax purposes	during the tax year? Un	ited States			
С	Have you ever applied to be a green card holder (lawful per	manent resident) of the	United States? .		☐ Yes	⊠ No
D	Were you ever:	,				
1	1. A U.S. citizen?				☐ Yes	⊠ No
2	2. A green card holder (lawful permanent resident) of the Unit				Yes	⊠ No
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for					
E	If you had a visa on the last day of the tax year, enter yo immigration status on the last day of the tax year. $_{\rm F1}$	ur visa type. If you didn	i't have a visa, ente	•		
F	Have you ever changed your visa type (nonimmigrant statu If you answered "Yes," indicate the date and nature of the	s) or U.S. immigration st	atus?		☐ Yes	⊠ No
G	List all dates you entered and left the United States during	2022 Coo instructions				
G	Note: If you're a resident of Canada or Mexico AND com		ad States at frague	nt intonvolo		
	check the box for Canada or Mexico and skip to item H			Mexico		
		_				101-1
	Date entered United States Date departed United States mm/dd/yy mm/dd/yy	Date er	ntered United States mm/dd/yy		tea Unite m/dd/yy	d States
	ППП/ССЛУУ		ттти аалуу		iii/dd/yy	
		_				
Н	Give number of days (including vacation, nonworkdays, and p					
	2021, 2022	, and 2023	365	·	$\nabla$	□No
I	Did you file a U.S. income tax return for any prior year? . If "Yes," give the latest year and form number you filed:				⊠ Yes	□ No
J	Are you filing a return for a trust?				☐ Yes	⊠ No
	If "Yes," did the trust have a U.S. or foreign owner under U.S. person, or receive a contribution from a U.S. person?				☐ Yes	□No
K	Did you receive total compensation of \$250,000 or more du				☐ Yes	⊠ No
••	If "Yes," did you use an alternative method to determine the				☐ Yes	□ No
L	Income Exempt From Tax—If you are claiming exemption	·				
_	complete (1) through (3) below. See Pub. 901 for more info			in acty with	a rororgi	oodiiiiy,
1	Enter the name of the country, the applicable tax treaty artic amount of exempt income in the columns below. Attach Form	le, the number of months		claimed the trea	aty benefi	t, and the
	·	<u> </u>		(4) 4		
	(a) Country	• • • • • • • • • • • • • • • • • • • •	c) Number of months imed in prior tax yea		ount of exc current to	•
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do	not enter it anywhere els	se on line 1			
2	2. Were you subject to tax in a foreign country on any of the in				☐ Yes	☐ No
3	3. Are you claiming treaty benefits pursuant to a Competent A	authority determination?			☐ Yes	⊠ No
	If "Yes," attach a copy of the Competent Authority determine	=				
М	Check the applicable box if:	-				
1	<ol> <li>This is the first year you are making an election to treat inco with a U.S. trade or business under section 871(d). See ins</li> </ol>					
2	2. You have made an election in a previous year that has n States as effectively connected with a U.S. trade or business	ot been revoked, to trea	at income from rea	l property loca	ated in th	ne United

### 8880 Form

#### **Credit for Qualified Retirement Savings Contributions**

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 54

Name(s) shown on return
PALLAVI REDDY GADDAM

Your social security number 743-33-3535

CAUTION

You cannot take this credit if either of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$36,500 (\$54,750 if head of household; \$73,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2006; (b) is claimed as a dependent on someone else's 2023 tax return; or (c) was a **student** (see instructions).

esignated benefici lective deferrals to contributions, and 5 dd lines 1 and 2 dertain distribution extensions) of your oth spouses' amo subtract line 4 from a each column, ent dd the amounts or onter the amount fronter the applicable over—  If line 8 is—  Over—  \$2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	ciary for 202 to a 401(k) 1 501(c)(18)(E cons received ir 2023 tax re counts in <b>bot</b> m line 3. If ze nter the <b>sma</b> con line 6. If ze from Form 1 ble decimal a	23. <b>Do not</b> include ro or other qualified er D) plan contributions	LE account contributions of the contribution of the contribut	ary employee tions)				34. 34. 34. 7	(b) You	34.
esignated benefici lective deferrals to contributions, and 5 dd lines 1 and 2 dertain distribution extensions) of your oth spouses' amo subtract line 4 from a each column, ent dd the amounts or onter the amount fronter the applicable over—  If line 8 is—  Over—  \$2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	ciary for 202 to a 401(k) 1 501(c)(18)(E cons received ir 2023 tax re counts in <b>bot</b> m line 3. If ze nter the <b>sma</b> con line 6. If ze from Form 1 ble decimal a	23. <b>Do not</b> include ro or other qualified er 0) plan contributions	billover contributions mployer plan, volunta for 2023 (see instructions of the due da ns). If married filing journations for an exception of the due da ns, if married filing journations for an exception of the due da 100 take this credit 140-NR, line 11* the below.  Individual status Head of	ary employee tions)	2 3 4 5 6			34. 34. 34.		34.
ontributions, and 5 dd lines 1 and 2 dertain distribution extensions) of your oth spouses' amo ubtract line 4 from a each column, enter the amounts or onter the amount fronter the applicable over—  If line 8 is—  Over—  S2 1,750 \$2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	ons received	D) plan contributions	for 2023 (see instructions for an exception of	tions)	3 4 5 6			34. 34. 34.		34.
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retrain distribution attensions) of your oth spouses' amo ubtract line 4 from a each column, ent dd the amounts or oth the amount from the applicable of the	ons received ar 2023 tax recounts in <b>bot</b> m line 3. If zonter the <b>sma</b> on line 6. If z from Form 1 tole decimal a	d after 2020 and return (see instruction th columns. See instruction th columns. See instruction or less, enter -0-aller of line 5 or \$2,00 zero, stop; you can't 1040, 1040-SR, or 10 amount from the table Married	ns). If married filing journations for an exception of an exception of the control of the contro	pintly, include tition	4 5 6		. [	34. 34.		34
n each column, ent dd the amounts or nter the amount from the applicable    If line 8 is—  Over—  S2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	nter the sma on line 6. If z from Form 1 ble decimal a	aller of line 5 or \$2,00 zero, stop; you can't 1040, 1040-SR, or 10 amount from the table	take this credit	8 is—	6		. [	34.		34
n each column, ent dd the amounts or nter the amount from the applicable    If line 8 is—  Over—  S2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	nter the sma on line 6. If z from Form 1 ble decimal a	aller of line 5 or \$2,00 zero, stop; you can't 1040, 1040-SR, or 10 amount from the table	take this credit	8 is—			. [			34
dd the amounts or nter the amount from the applicable of the second of t	on line 6. If z from Form 1 le decimal a	zero, <b>stop</b> ; you can't 1040, 1040-SR, or 10 amount from the table A	take this credit	8 is—			. 525.	7		34
If line 8 is— Over—  S2 \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$4	from Form 1 ble decimal a - But not	1040, 1040-SR, or 10 amount from the table A	40-NR, line 11* e below. and your filing status Head of	s is—			25.			
Over—  \$2 \$21,750 \$2 \$23,750 \$32,625 \$35,625 \$35,625 \$36,500 \$4	But not	Married	Head of							
Over— \$2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4		** * * * * * * * * * * * * * * * * * * *		Single Marr						
\$2 \$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	over-		nousenoia	separate		ng				
\$21,750 \$2 \$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	0.001	Enter on	line 9—	Qualifying surviv	ving sp	oouse				
\$23,750 \$3 \$32,625 \$3 \$35,625 \$3 \$36,500 \$4	\$21,750	0.5	0.5	0.5						
\$32,625 \$3 \$35,625 \$3 \$36,500 \$4	\$23,750	0.5	0.5	0.2						
\$35,625 \$3 \$36,500 \$4	\$32,625	0.5	0.5	0.1				9	×	( .5
\$36,500 \$4	\$35,625	0.5	0.2	0.1						
	\$36,500	0.5	0.1	0.1						
1	\$43,500	0.5	0.1	0.0						
\$43,500 \$4	\$47,500	0.2	0.1	0.0						
\$47,500 \$5	\$54,750	0.1	0.1	0.0						
\$54,750 \$7	\$73,000	0.1	0.0	0.0						
\$73,000		0.0	0.0	0.0						
	Note: If	line 9 is zero, stop; y	ou can't take this cre	edit.						
fultiply line 7 by lin	14016.11							10		17
imitation based on								11		

<sup>\*</sup> See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.

17.

and on Schedule 3 (Form 1040), line 4