(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

Submission Identification Number (SID)					
Taxpayer's name	Social security	y number			
LEKHANA DHULIPUDI	346-79-	-1357			
Spouse's name	Spouse's soci	Spouse's social security number			
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you aı	re 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 64,473.			
2 Total tax		2 6,445.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 10,249.			
4 Amount you want refunded to you		4 3,804.			
5 Amount you owe		5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a copy	y of your return)			
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accoupayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insuthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tempayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellatio business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amende Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or gene 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 if you are entering your own PIN and your return is filed using the Practitioner PIN	ransmitter, or electro for rejection of the tra the U.S. Treasury ar nt indicated in the tra stitution to debit the minate the authoriza n requests must be in the processing of the payment. I furtle ed) I am now authoriz erate my PIN Ent dor am now authorizing	nic return originator (ERO) ansmission, (b) the reason of its designated Financial to preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the acknowledge that the zing and, if applicable, my as my er five digits, but the entry all zeros.			
below. Your signature ▶ Date	e ▶				
Spouse's PIN: check one box only					
I authorize to enter or gene	-	as my			
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but n't enter all zeros			
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Spouse's signature ▶ Date	e►				
Practitioner PIN Method Returns Only—continue b	elow				
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.		6 0 8 2 7 1 er all zeros			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided	submitting this retu	rn in accordance with the			
ERO's signature ▶ Date	e▶				
ERO Must Retain This Form — See Instruction					

Don't Submit This Form to the IRS Unless Requested To Do So

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 Jar	n. 1–D	ec. 31, 2023, or other tax year beginn	ning, 2023, ending, 20					See separate instructions.
Your first name and middle initial				ıme		our identifying number ee instructions)		
LEKHANA DHU				IPUDI			346-	79-1357
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
6400 S SY	RAC	USE WAY						205
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code
CENTENNIA	L					CO		80111
Foreign country	nam	е	Foreigr	n province/state/county		Foreign p	ostal co	de
Filing Status	1	Single		,	ng surviving spouse	,		tate Trust
Check only one box.	"	you checked the QSS box, enter the c	oniia s na	ame if the qualifying pers	on is a child but not	your depe	enaent:	
	At a	ny time during 2023, did you: (a) recei	vo (ac a	roward award or navm	ant for proporty or se	pruicos): o	(b) coll	ovehange or
Digital Assets		rwise dispose of a digital asset (or a f						. Yes X No
Dependents						(4) Che	eck the box	c if qualifies for (see inst.):
(see instructions):		(1) First name		(2) Dependent's identifying number	(2) Polationabin to va	Chil	d tax credi	Credit for other
		(1) First name Last name		identifying number	(3) Relationship to you			dependents
If more than four							-	
dependents, see								
instructions and check here								
Income	1a	Total amount from Form(s) W-2, box	1 (see ii	netructions)			. la	81,762.
Effectively	b	Household employee wages not rep	•	,				0177021
Connected	c	Tip income not reported on line 1a (s		. ,				
With U.S.	d	Medicaid waiver payments not report		*				
Trade or	e	Taxable dependent care benefits fro		, , ,	*		. 1e	
Business	f	Employer-provided adoption benefit		*			. 1f	
240000	g	Wages from Form 8919, line 6	. 1g					
Attach	h	Other earned income (see instruction	. 1h					
Form(s) W-2, 1042-S,	i	Reserved for future use						
SSA-1042-S,	j	Reserved for future use					. 1j	
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)						
attach	z	Add lines 1a through 1h	, .	,			. 1z	81,762.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	ı	b Tax	able interest		. 2b	
tax was	3a	Qualified dividends 3a	1	b Ord	inary dividends .		. 3b	
withheld.	4a	IRA distributions 4a			able amount			
If you did not	5a	Pensions and annuities 5a	. 5b					
get a Form W-2, see	6	Reserved for future use						
instructions.	7	Capital gain or (loss). Attach Schedu	•		•			
	8	Additional income from Schedule 1 (•				-17,289.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	B. This is	your total effectively c	onnected income		. 9	64,473.
	10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income							
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income			. 11	64,473.
	12	Itemized deductions (from Schedu deduction (see instructions)						13,850.
	13a	Qualified business income deduction			1 1			
	b	Exemptions for estates and trusts or						
	С	Add lines 13a and 13b					. 13c	
	14	Add lines 12 and 13c						13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta x	cable income .	<u>.</u>	. 15	50,623.

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	314 2	4972	2 3			16	6,445.
Credits	17	Amount from Schedule 2 (Form 1)	040), line	3						17	0.
	18	Add lines 16 and 17								18	6,445.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (F	orm 104	0) .			19	
	20	Amount from Schedule 3 (Form 1)	040), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If ze	ro or less	s, enter -0			٠.			22	6,445.
	23a	Tax on income not effectively con Schedule NEC (Form 1040-NR), lin					23a				
	b	Other taxes, including self-employline 21	•	•	•	′ .	23b				
	С	Transportation tax (see instruction	ns)			[23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is you	total ta	x						24	6,445.
Payments	25	Federal income tax withheld from									
-	а	Form(s) W-2				[25a	1	0,249.		
	b	Form(s) 1099				[25b				
	С	Other forms (see instructions) .				[25c				
	d	Add lines 25a through 25c								25d	10,249.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and				- 1				26	
	27	Reserved for future use					27				
	28	Additional child tax credit from So	hedule 8	812 (Form 1040)		28				
	29	Credit for amount paid with Form					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040), line 15									
	32									32	
	33	Add lines 25d, 25e, 25f, 25g, 26, a								33	10,249.
Refund	34	If line 33 is more than line 24, sub					-	-		34	3,804.
	35a	Amount of line 34 you want refun								35a	3,804.
Direct deposit? See instructions.	b	Routing number 0 7 1 0			c Type	e: 🔀 (Check	ing _	Savings		
occ mondonons.	d	Account number 7 6 2 7									
	е	If you want your refund check ma									
		enter it here.				1				-	
	36	Amount of line 34 you want applie					36				
Amount	37	Subtract line 33 from line 24. This For details on how to pay, go to w		-		etione				27	
You Owe	38	Estimated tax penalty (see instruc	-	-). 	38			37	
Third		ou want to allow another person to				o instruc			es. Comp	loto ho	ow. 🗵 No
Party	•	·	นเอบนออ เเ			e iristruc	illoris.				OW. EN NO
Designee	Designee's Phone Personal identifit name no. number (PIN)								ication		
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								s, and to th		
Sign	Your	signature	1	Date	Your occu	upation			If the	e IRS s	ent you an Identity
Here		3		Tour occupation				Protection PIN, enter it here			
			ENGINEER			(see	inst.)				
	Phone			Email address		-	_		Larre		
Paid	Prepa	rer's name	Preparer'	's signature			Date		PTIN		Check if:
Preparer			SYAM PR	IYA RAM SAGAI	R GUPTA T	'ALLAM	02/1	1/2024	P0208	2703	Self-employed
Use Only		s name GLOBAL TAXES L							Phone n	, ,	78)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's Ell								IN 8	4-3171965	

SCHEDULE 1 (Form 1040)

10

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

LEKH	EKHANA DHULIPUDI 346-7							
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							
4	Other gains or (losses). Attach Form 4797	4						
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	E . 5	-17,289.					
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						
ı	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)	8o						
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:							
_	Tatal athonics and the second of	8z						
9	Total other income. Add lines 8a through 8z		9					

-17,289.

10

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-				
	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	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	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	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	, - , - , - , , , , , ,		-		

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

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

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number LEKHANA DHULIPUDI 346-79-1357 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)					
			Nature of income			(a) 1076	(b) 1370	(6) 30%	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign o	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) to	transactions	1c					
2	Interest:									
а	a Mortgage			2a						
b	b Paid by foreign corporations			2b						
С	c Other			2c						
3	Industrial royalties (patents, trademarks, etc.)				3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights	recording, publishing, etc.)		5					
6	Real property income and natural resources royalties				6					
7	Pensions and annuities				7					
8	Social security benefits				8					
9			elow		9					
10	Gambling—Resident If zero or less, ente	s of C r -0	anada only. Enter net income in column (c	c).						
а	Winnings									
b	Losses		<u> </u>		10c					
11	Note: Enter winnings	s only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13	_		columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines						NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	nges of Proper	ty	I	
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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. ss. Do not include a gain									
	on disposing of a U.S. real y interest; report these									
	nd losses on Schedule D									
Report	property sales or	-								
	ges that are effectively ted with a U.S. business	17	Add columns (f) and (g) of line 16 .	l				17	(
on Sche	edule D (Form 1040), 797. or both.		Capital gain. Combine columns (f) and							
1 01111 4	777, 01 00011.	0	Capital gain Combine Columns (i) and	(9) 01 1110 17	. டாட	ino not gain nere	c and on mic 5 abo	3 v 5. 11 & 1033, GITE	10	

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Other Information

Attach to Form 1040-NR.

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 sh	nown on Form 1040-NR				Your identifying	number						
LEKH	ANA DHULIPUDI				346-79-13	357						
Α	Of what country or countries w											
В	In what country did you claim	residence for tax purposes	s during the tax y	ear? United States								
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	t) of the United States? .		☐ Yes	⊠ No					
D	Were you ever:											
1.	A U.S. citizen?					☐ Yes	⊠ No					
2.	A green card holder (lawful per	rmanent resident) of the Un	ited States? .			☐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2											
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 yearF1											
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?											
G	List all dates you entered and	left the United States durin										
	Note: If you're a resident of C											
	check the box for Canada or	Mexico and skip to item I	1 ,	\square Canada	☐ Mexico							
	Date entered United States	Date departed United State	es	Date entered United State			d States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy						
					04-4							
Н	Give number of days (including 2021	, 2022	, an	d 2023 365	·	_						
ı	Did you file a U.S. income tax					⊠ Yes	☐ No					
	If "Yes," give the latest year ar						.					
J	Are you filing a return for a trust?											
	U.S. person, or receive a conti					Yes	□No					
K	Did you receive total compens					□ Yes	⊔ No ⊠ No					
K	If "Yes," did you use an alterna		-			Yes	□ No					
L	Income Exempt From Tax—If											
_	complete (1) through (3) below				tax troaty with	a loroign	oodiidy,					
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the					
	(a) Cou		(b) Tax treaty and		ns (d) Am	ount of exe	emnt					
	(a) 55a	That y	(b) Tax troaty are	claimed in prior tax ye		n current ta	•					
	(e) Total. Enter this amount of		-									
	Were you subject to tax in a fo					∐ Yes	∐ No					
3.	Are you claiming treaty benefit		-			∐ Yes	⊠ No					
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to y	our return.								
М	Check the applicable box if:					6						
	This is the first year you are mount with a U.S. trade or business u	under section 871(d). See ir	structions				🗆					
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											

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041,

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 346-79-1357 LEKHANA DHULIPUDI Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) FLAT NO-4705, MOTINAGAR ERRAGADDA, HYDERABAD TELANGANA IN 500018 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 610. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 550. Auto and travel (see instructions) 6 2,140. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,620. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 4,250. 14 Repairs 14 15 Supplies 15 4,468. 16 16 Taxes 17 Utilities 17 4,871. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 17,899. Total expenses. Add lines 5 through 19 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -17,289.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -17,289.) 610. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 17,899. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 17,289. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

-17,289.

26

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2