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

	1.01.01.00					
Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numl	per		
DHAN	NUNJAY GOPU	856-55-2631				
Spouse's	s name	Spouse's social security number				
Part	Tax Return Information — Tax Year Ending December 31, 2023 (En	ter year you a	re au	thorizina	1	
	whole dollars only on lines 1 through 5.	ici yeai you a	ic au	ti ionzing.	<i>)</i>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		1	6	,323.	
	Total tax		2		0.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		711.	
4	Amount you want refunded to you		4		711.	
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	d keep a cop	y of y	our retu	rn)	
return (or to send for any Agent to paymer authoriz paymer business taxes to personal	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at original or amended) I am now authorizing. I consent to allow my intermediate service provider, translar my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the ionitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the original force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation residus prior to the payment (settlement) date. I also authorize the financial institutions involved in the alidentification number (PIN) below is my signature for the income tax return (original or amended) in Europe Withdraws (Consent).	smitter, or electro- rejection of the transition of the transition of the transition to debit the authorizate the authorizate equests must be the processing of a payment. I further transition of the processing of the processing of the processing of the payment.	onic refansmis and its of ax preperture entry ation. The receive the elements of the elements	turn origina ssion, (b) the designated caration soft to this according for revoke (ved no late ectronic packnowledge	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the	
	nic Funds Withdrawal Consent. yer's PIN: check one box only					
X		te mv PIN	2 6	5 3 1	as my	
•••	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En		digits, but er all zeros	ao my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.					
Your si	ignature ▶ Date ▶					
Snous	e's PIN: check one box only					
Ороиз	I authorize to enter or general	te my PINI			as my	
	ERO firm name	-	ter five	digits, but	asiny	
	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 if you are entering your own PIN and your return is filed using the Practitioner PIN me below.					
Spouse	e's signature ► Date ►					
	Practitioner PIN Method Returns Only—continue belo	w				
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.	2 2 4 9 Don't ent	6 0	8 2 7	1	
		Don't ent	-: un 20			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sulments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	omitting this retu	ırn in a	accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	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 Jan	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	:	2023,	ending	,	20	instructions.		
Your first name and middle initial			Last name Yo						our identifying number see instructions)		
DHANUNJAY					856-	856-55-2631					
		per and street). If you have a P.O. box							Apt. no.	_	
3745 CAPE	TIA	N CT							204		
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces belov	/.		State		ZIP code	_	
FAIRBORN							OH		45324		
Foreign country	name	е	Foreigr	n province/state/c	ounty		Foreign	oostal co	de		
Filing Status									tate		
Check only one box											
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f						r (b) sell, (ס	
Dependents							(4) Ch	eck the box	x if qualifies for (see inst		
(see instructions):		(1) First name Last name		(2) Dependen identifying num		(3) Relationship to yo	Chil	d tax credi	it Credit for other dependents		
		(i) i i i i i i i i i i i i i i i i i i		, ,		(c) Holadionionip to ye			П	_	
If more than four								Ħ		_	
dependents, see instructions and								Ħ		_	
check here								$\overline{\Box}$		_	
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions) .				. 1a	6,323	_	
Effectively	b	. 1b									
Connected											
With U.S.	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26 .				. 1e			
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29				. 1f			
	g	Wages from Form 8919, line 6						. 1g			
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .					. 1h			
1042-S,	i	Reserved for future use									
SSA-1042-S,	j	Reserved for future use									
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		•)-NR), i 	tem L, 1k					
attach	z	Add lines 1a through 1h						. 1z	6,323		
Form(s) 1099-R if	2a	Tax-exempt interest 2a			b Tax	able interest		. 2b			
tax was	3a	Qualified dividends 3a	ı		b Ord	linary dividends		. 3b			
withheld.	4a	IRA distributions 4a	1		b Tax	able amount		. 4b			
lf you did not	5a	Pensions and annuities 5a	1		b Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use						. 6			
instructions.	7	Capital gain or (loss). Attach Schedu	ile D (Fo	rm 1040) if require	ed. If no	ot required, check he	re [□			
	8	Additional income from Schedule 1									
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	3. This is	your total effect	ively c	onnected income		. 9	6,323		
	10	Adjustments to income from Sched income	,	,,		,					
	11	Subtract line 10 from line 9. This is y	our adju	sted gross inco	me			. 11	6,323		
	12	Itemized deductions (from Schedudeduction (see instructions)		13,850							
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or	nly (see i	nstructions) .		13b					
	С	Add lines 13a and 13b						. 13c	;		
	14	Add lines 12 and 13c						. 14	•		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is y	our ta	cable income		. 15	0		

Form 1040-NR (2	2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	rm(s): 1 88	314 2 [4972	2 ;	3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form 10	40), line	3						17	0.
	18	Add lines 16 and 17								18	0.
	19	Child tax credit or credit for other of	depende	ents from Schedi	ule 8812 (Fo	rm 104	10) .			19	
	20	Amount from Schedule 3 (Form 10	40), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zer	o or less	s, enter -0						22	0.
	23a	Tax on income not effectively conn Schedule NEC (Form 1040-NR), lin		vith a U.S. trade o			23a				
	b	Other taxes, including self-employ line 21	ment ta	x, from Schedule	e 2 (Form 10	040),	23b				
	С	Transportation tax (see instructions					23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your	total ta	x						24	0.
Payments	25	Federal income tax withheld from:									
,	а	Form(s) W-2					25a		711.		
	b	Form(s) 1099				.	25b				
	С	Other forms (see instructions) .				.	25c				
	d	Add lines 25a through 25c								25d	711.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and	amount	applied from 20	22 return .					26	
	27	Reserved for future use				- 1	27				
	28	Additional child tax credit from Sch				- 1	28				
	29	Credit for amount paid with Form 1					29				
	30	Reserved for future use				- 1	30				
	31	Amount from Schedule 3 (Form 10					31				
	32	Add lines 28, 29, and 31. These are	e your t o	otal other paym	ents and re	funda	ble cr	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, a								33	711.
Refund	34	If line 33 is more than line 24, subt								34	711.
	35a	Amount of line 34 you want refund					-	-		35a	711.
Direct deposit?	b	Routing number 0 4 4 0	0 0	0 3 7	c Type:	X	Checl	king 🗌	Savings		
See instructions.	d	Account number 7 6 7 3							Ü		
	е	If you want your refund check mai	led to ar	n address outsid	e the United	d State	s not	shown or	page 1,		
		enter it here.									
	36	Amount of line 34 you want applie					36]			
Amount	37	Subtract line 33 from line 24. This	is the ar	nount you owe.				•			
You Owe		For details on how to pay, go to w	ww.irs.g	ov/Payments or	see instruct	ions .				37	
	38	Estimated tax penalty (see instruct	ions) .				38				
Third	Do yo	ou want to allow another person to d	iscuss t	his return with th	e IRS? See	instruc	ctions	. <u> </u>	es. Comp	lete be	low. 🗵 No
Party Designee	Designee's Phone Personal identifiname no. number (PIN)					fication					
		penalties of perjury, I declare that I have they are true, correct, and complete. Dec									
Sign	Your signature Date Your occupation				If th	e IRS s	ent you an Identity				
Here		5.g. (a.a. 5			STUDEN				Pro		PIN, enter it here
	Phon	e no.		Email address							
Paid			reparer	's signature			Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM S	SYAM PR	IYA RAM SAGAF	R GUPTA TA	LLAM	03/0	06/2024	P0208	2703	Self-employed
Preparer	Firm's name CLODAL TAVES LIC							78)965-9522			
Use Only		s address 245 ROONEY CT		NINSWICK N.	T 08816				Firm's E		4-3171965

BAA

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 DHANUNJAY GOPU 856-55-2631 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		,	() (0)	# N 450/	() 222/	(d) Other (specify)			
			(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								
•									
a b	Winnings Losses	10c							
11	Gambling—Residents of countries other than Canada.	100							
•••	Note: Enter winnings only. Losses aren't 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	From	Sales or Excha	nges of Proper	ty				
losses f exchang within the	nly the capital gains and rom property sales or ges that are from sources he United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acc mm/dd/yr		(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 ai	nd losses on Schedule D								
(Form 1	040). property sales or								
exchan	ges that are effectively								
on Sche						<u>()</u>			
Form 4	18 Capital gain. Combine columns (f) and (g) of line 1	7. Ente	er the net gain here	and on line 9 abo	ove. If a loss, ente	r -0 18			

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Your identifying number

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

DH	NUNJAY GOPU			856-55-26	531					
Α	Of what country or countries were you a citizen or nation	al during the tax year?	INDIA							
В	In what country did you claim residence for tax purpose	In what country did you claim residence for tax purposes during the tax year? United States								
С	Have you ever applied to be a green card holder (lawful p	permanent resident) of t	the United States? .		☐ Yes	⊠ No				
D	Were you ever:	,								
1	. A U.S. citizen?		Yes	⊠ No						
	A green card holder (lawful permanent resident) of the Ur			⊠ No						
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,									
E	If you had a visa on the last day of the tax year, enter			er vour U.S.						
transferration which is not the first along of the horizon.										
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	a abangai			_ 100	⊠ No				
G	List all dates you entered and left the United States durin	<u> </u>								
<u> </u>	Note: If you're a resident of Canada or Mexico AND cor	-		ent intervals						
	check the box for Canada or Mexico and skip to item h			Mexico						
	Date entered United States		e entered United States		rted United	1 States				
	mm/dd/yy mm/dd/yy	les Dati	mm/dd/yy		nm/dd/yy	Sidies				
	,,	\dashv	.,,		,,					
		_								
н	Give number of days (including vacation, nonworkdays, and	l d partial davs) vou were l	present in the United S	tates during:						
•	2021, 2022									
ı	Did you file a U.S. income tax return for any prior year? .	, and 202	.0	···	X Yes	□No				
•	If "Yes," give the latest year and form number you filed:				100					
J	Are you filing a return for a trust?		01410		Yes	⊠ No				
•	If "Yes," did the trust have a U.S. or foreign owner under				_ 100	Z 110				
	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				☐ Yes	⊠ No				
	If "Yes," did you use an alternative method to determine				Yes	□No				
L	Income Exempt From Tax—If you are claiming exempt	•								
	complete (1) through (3) below. See Pub. 901 for more in					, , , , , , , , , , , , , , , , , , ,				
1	Enter the name of the country, the applicable tax treaty and	ticle, the number of mon	nths in prior vears you o	claimed the tre	atv benefi	t. and the				
	amount of exempt income in the columns below. Attach Fo				,	-,				
	(a) Country	(b) Tax treaty article	(c) Number of months	','						
	(2) 333)	1 ` '	claimed in prior tax year							
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	Do not enter it anywhere	e else on line 1							
2	. Were you subject to tax in a foreign country on any of the	•			Yes	☐ No				
3	. Are you claiming treaty benefits pursuant to a Competent	t Authority determinatio	on?		☐ Yes	⊠ No				
	If "Yes," attach a copy of the Competent Authority deterr									
М	Check the applicable box if:	•								
1	This is the first year you are making an election to treat in	ncome from real propert	ty located in the United	d States as ef	fectively c	onnected				
	with a U.S. trade or business under section 871(d). See instructions									
2	You have made an election in a previous year that has			al property lo	cated in th	e United				