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)

T.....

Taxpay	ver's name		Social security number					
VAM	ISHIDHAR REDDY MACHA		205-41-9557					
Spous	s's name	Spouse's soc	ial security number					
Par	t I Tax Return Information – Tax Year Ending December 31, 2	2023 (Enter	year you a	re authorizing.)				
Enter	whole dollars only on lines 1 through 5.		<u> </u>					
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income			1 7,563.				
2	Total tax			2 0.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3 4.				
4	Amount you want refunded to you			4 4.				
5	Amount you owe			5				
Par				y 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		Ë	1
\mathbf{X}	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		-
			-			1 1	

Ent don	as my				
1	9	5	5	7	

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 mv 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.

Du											
Practitioner PIN Method Returns Only—continue below Part III Certification and Authentication — Practitioner PIN Method Only											
nly											
1.	2	2							2	7	1
	inue nly	inue bele nly	nly	inue below nly	inue below hly J. 2 2 2 4	inue below hly J. 2 2 2 4 9	inue below hly J. 2 2 2 4 9 6	inue below Ily J. 2 2 2 4 9 6 0	inue below hly	inue below Ily I. 2 2 2 4 9 6 0 8 2	inue below Ily I. 2 2 2 4 9 6 0 8 2 7

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 >	Date	:								
-	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So									
For Dependence Reduction Act Notice and your to	Return instructions	Earm 8879 (Pay 01 2021)								

1040)-	VR Department of the Treasury-Inter U.S. Nonresident Al	nal Revenue Service ien Income Ta	x Return	2023	OMB No. 1	545-0074	or stap	Dnly—Do not write le in this space.		
For the year Jan	n. 1–[Dec. 31, 2023, or other tax year beginr	ing	, 2023, e	ending	, 20		See separate			
Your first name	and	middle initial	Last name						ng number ns)		
VAMSHIDHA	AR I	REDDY	МАСНА	205	205-41-9557						
Home address ((num	ber and street). If you have a P.O. box	, see instructions.						Apt. no.		
1202 LINC	OLN	I AVE							#12		
City, town, or po	ost o	ffice. If you have a foreign address, al	so complete spaces	below.		State		ZIP co	de		
CHARLESTO	N					IL		6192	0		
Foreign country	nam	le	Foreign province/st	ate/county		Foreign	postal c	ode			
Filing Status Check only one box.	lf 	you checked the QSS box, enter the o	u checked the QSS box, enter the child's name if the qualifying person is a child but not your depender								
Digital Assets	At a oth	ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f	ive (as a reward, awa inancial interest in a	rd, or payme digital asset)'	nt for property or ? (See instructions	services); c s.)	or (b) sell	exchan	ge, or Yes 🛛 No		
Dependents						(4) Cł	eck the b	ox if qualif	ies for (see inst.):		
(see instructions):			(2) Depe identifying		(3) Relationship to	Ch	ild tax cre		redit for other dependents		
				grianiboi		you					
If more than four											
dependents, see instructions and											
check here									<u> </u>		
Income	1a	Total amount from Form(s) W-2, box	(1 (see instructions)				. 1	3	7,563.		
Effectively	b	Household employee wages not rep	,						.,		
Connected	c	Tip income not reported on line 1a (-			
With U.S.	d	Medicaid waiver payments not repo									
Trade or	е	Taxable dependent care benefits fro						•			
Business	f	Employer-provided adoption benefit						F			
	g	Wages from Form 8919, line 6					. 19	3			
Attach Form(s) W-2,	h	Other earned income (see instructio	ns)				. 11	1			
1042-S,	i	Reserved for future use			. 1i						
SSA-1042-S,	j	Reserved for future use					. 1	j			
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					. 1:	2	7,563.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a	1	b Taxa	able interest		. 21)			
tax was	3a	Qualified dividends 3a	3	b Ordi	nary dividends .		. 31	>			
withheld.	4a	IRA distributions 4a			able amount			>			
If you did not	5a	Pensions and annuities 5a			able amount)			
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						_			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	-						7,563.		
	10					• • •	. 10)			
	11	Subtract line 10 from line 9. This is y	our adjusted gross	income .			. 1	I	7,563.		
	12	Itemized deductions (from Schedu deduction (see instructions)		2	13,850.						
	13a	Qualified business income deductio	n from Form 8995 or	Form 8995-A	A. 13a						
	b	Exemptions for estates and trusts o	,								
	С	Add lines 13a and 13b									
	14								13,850.		
	15	Subtract line 14 from line 11. If zero		is is your tax	able income .		. 1		0.		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

orm 1040-NR (2023)								Page 2
ax and	16	Tax (see instructions). Check if an	y from Fo	rm(s): 1 🗌 88	314 2 497	72 3		16	0.
credits	17	Amount from Schedule 2 (Form	1040), line	3				17	0.
	18	Add lines 16 and 17						18	0.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (Form 10)40)		19	
	20	Amount from Schedule 3 (Form	1040), line	8				20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If z						22	0.
	23a	Tax on income not effectively co							
		Schedule NEC (Form 1040-NR),				23a			
	b	Other taxes, including self-emple							
		line 21	-			23b			
	с	Transportation tax (see instruction				23c			
	d	Add lines 23a through 23c	,					23d	
	24	Add lines 22 and 23d. This is you						24	0.
ayments	25	Federal income tax withheld from							<u>, , , , , , , , , , , , , , , , , </u>
aymento	a	Form(s) W-2				25a	4		
	b	Form(s) 1099				25b		·	
	c	Other forms (see instructions)				250 25c			
	d	Add lines 25a through 25c						25d	4.
	e	Form(s) 8805						25e	
	f	Form(s) 8288-A						25e	
								25g	
	g	Form(s) 1042-S							
	26	2023 estimated tax payments ar		••			•••	26	
	27	Reserved for future use				27		_	
	28	Additional child tax credit from S				28		_	
	29	Credit for amount paid with Form				29		_	
	30	Reserved for future use				30		_	
	31	Amount from Schedule 3 (Form	,.			31			
	32	Add lines 28, 29, and 31. These	-					32	
	33	Add lines 25d, 25e, 25f, 25g, 26,						33	4.
efund	34	If line 33 is more than line 24, su				•		34	4.
	35a	Amount of line 34 you want refu				_	Savings		4.
ect deposit? e instructions.	b	Routing number 0 8 1 2	6						
e instructions.	d	Account number 1 9 9 3							
	е	If you want your refund check m	ailed to a	n address outsic	le the United Stat	es not shown on	page 1	,	
		enter it here.				·			
	36	Amount of line 34 you want app	ied to yo	ur 2024 estimat	ed tax	36			
mount	37	Subtract line 33 from line 24. Thi		-					
ou Owe		For details on how to pay, go to	www.irs.g	<i>ov/Payments</i> or	see instructions .			37	
	38	Estimated tax penalty (see instru	ctions)			38			
nird	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ictions.	es. Com	plete be	low. 🛛 No
arty	Desig	nee's		Phone				tification	
esignee	name						er (PIN)		
		penalties of perjury, I declare that I have							
an		they are true, correct, and complete. D	eclaration						, ,
gn	Yours	signature		Date	Your occupation	1			ent you an Identity
ere		STUDENT WORKER						etection	PIN, enter it here
					STODENI, MC		(Se	e inst.)	
	Phone	e no. rer's name	Droparar	Email address 's signature		Date	PTIN		Chaoleife
aid	•		•	Ū				00700	Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		kiya kam sagai	R GUPTA TALLAM	02/23/2024		82703	Self-employed
reparer		name CTODAT MAVEC	TTC				Phone	no (6	78)965-9522
reparer se Only	Firm's	address 245 ROONEY C					Firm's		34-3171965

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Sequence No. 7B

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2

Attachment

VAMSHIDHAR REDDY MACHA

Your identifying number 205-41-9557

Enter amount of income under the appropriate rate of tax. See instruct	tions.

	Nature of Income			(a) 10%	(b) 15%	(c) 30%	(c	(specify)		
					(a) 1076	(b) 1378	(C) 50 %		%	%
1	Dividends and divide	end equivalents:								
а	Dividends paid by U.	S. corporations		1a						
b	Dividends paid by fo	reign corporations		1b						
с	Dividend equivalent p	ayments received with respect to section 871(m) tran	nsactions	1c						
2	Interest:									
а	Mortgage			2a						
b	Paid by foreign corpo	orations		2b						
С	Other		2c							
3	Industrial royalties (p	atents, trademarks, etc.)	3							
4	Motion picture or TV	copyright royalties		4						
5	Other royalties (copy	rights, recording, publishing, etc.)		5						
6	Real property income	e and natural resources royalties	6							
7	Pensions and annuiti	ies	7							
8	Social security benef	fits		8						
9		e 18 below		9						
10	Gambling-Resident	ts of Canada only. Enter net income in column (c). r -0								
а	Winnings									
b	Losses			10c						
11	Note: Enter winnings	ts of countries other than Canada. s only. Losses aren't allowed		11						
12	Other (specify):									
				12						
13	Add lines 1a through	12 in columns (a) through (d)		13						
14		ate of tax at top of each column	-	14]	
15	Tax on income not e	ffectively connected with a U.S. trade or business.						-NR, line 23a	15	
		Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty			
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 acqui mm/dd/yyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more th subtract (d) fro	an (d),	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	vely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
	ty interest; report these nd losses on Schedule D 1040).									
Report	property sales or									
	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16					17	(
on Sche	edule D (Form 1040), 1797, or both.	18 Capital gain. Combine columns (f) and (g)						N	/ 18	
		ct Notice, see the Instructions for Form 1040-NB.			<u> </u>	2/16/24 PRO				(Form 1040-NB) 2023
								acheun		U VIII IVHU-INDI ZUZA

SCHE	DUL	e oi
(Form	1040-	NR)

Μ

Other Information

	DULE OI		Other	Informat	ion		OMB No. 15	45-0074
(Form	1040-NR)		Attach to	o Form 1040-N	IR.		<u> </u>)7
Departm	ent of the Treasury	Go t	o www.irs.gov/Form1040NR f				Attachment	
	Revenue Service		Answe	er all questions	5.		Sequence N	o. 7C
Name s	hown on Form 1040	-NR				Your identify		
VAMS	SHIDHAR RED	DY MACHA				205-41-	-9557	
Α	Of what country	y or countries v	vere you a citizen or national o	during the tax	year? INDIA			
в	In what country	/ did you claim	residence for tax purposes c	luring the tax	year? United States			
С	Have you ever	applied to be a	green card holder (lawful per	manent reside	nt) of the United States? .		. 🗌 Yes	🗙 No
D	Were you ever:							
	A U.S. citizen?							🗙 No
2.	•	· ·	rmanent resident) of the Unite				. 🗌 Yes	🔀 No
), see Pub. 519, chapter 4, fo					
Е			day of the tax year, enter you	ur visa type. If	you didn't have a visa, en	iter your U.S	5.	
	-		day of the tax year. $F1$					_
F	Have you ever	changed your v	risa type (nonimmigrant status	s) or U.S. immi	gration status?		. 🗌 Yes	🗙 No
	If you answered	d "Yes," indicat	e the date and nature of the c	hange:				
G	List all dates yo	ou entered and	left the United States during 2	2023. See instr	ructions.			
			anada or Mexico AND comm			_		
	check the box	for Canada or	Mexico and skip to item H .	_			-	
		United States	Date departed United States		Date entered United State	es Date d	eparted Unite	d States
	mm/o	dd/yy	mm/dd/yy	_	mm/dd/yy		mm/dd/yy	
				_				
				_				
				_				
н			vacation, nonworkdays, and p				g:	
_	2021		, 2022	, a	nd 2023 365	•		—
I			return for any prior year?					□ No
_	If "Yes," give th	ie latest year ar	nd form number you filed:		1040NR			
J	, 0		st?					🗙 No
			J.S. or foreign owner under t					—
			ribution from a U.S. person? .					□ No
K			ation of \$250,000 or more du					🛛 No
			ative method to determine the		•			No
L			you are claiming exemption See Pub. 901 for more inform			tax treaty v	vith a foreigr	i country,
1.	Enter the name	of the country,	the applicable tax treaty article e columns below. Attach Forn	e, the number	of months in prior years you	claimed the	e treaty benef	it, and the

	(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	o not enter it anywher	e else on line 1	
2.	Were you subject to tax in a foreign country on any of the income shown in 1(d) above?			
3. Are you claiming treaty benefits pursuant to a Competent Authority determination?				🗌 Yes 🛛 No
	If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable 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 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 States as effectively connected with a U.S. trade or busin			

BAA

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

REV 02/16/24 PRO Schedule OI (Form 1040-NR) 2023