Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpaver's name

Тахрау	er's name		Social security	/ number
SET	HU SANDEEP CHOWDARY KADIYALA		752-81-	2863
Spouse	s's name		Spouse's socia	al security number
Par	Tax Return Information — Tax Year Ending December 31,	2023 (Enter	year you ar	e authorizing.)
Enter	whole dollars only on lines 1 through 5.			0,
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income			1 11,720.
2	Total tax		[2 0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3 248.
4	Amount you want refunded to you		[4 248.
5	Amount you owe		[5
Dort	I Toxpover Declaration and Signature Authorization (Recourse	way aat and l		(of your notyme)

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. 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

			ERO firm name		Ē	Π
l authorize	GLOBAL	TAXES	ГГС	to enter or generate my PIN		-
	GT OD 3 T	ma 17 m o			11	-

Ent	er fiv n't er	ve di iter a	gits, all ze	but	as my
1	2	8	6	3	

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.

Spouse's signa	ature Da	ate 🕨	•						
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III C	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 6 nter a		2	7	1

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 F on't Submit This Form to the	-		
For Denergy and Deduction Act No	tion and your toy return instructions		DEV/ 02/22/24 DBO	Earm 8879 (Pay 01 2021

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040	-N	IR Department of the Treasury-Intern U.S. Nonresident Ali	nal Revenue en Inco	Service Me Tax Retu	m 20 23	OMB No.	1545-0074	IRS Use C or stapl	Dnly—Do not write le in this space.	
For the year Jan	. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023	8, ending		, 20	0 See separate instructions.		
Your first name a			Last name				Your i	Your identifying number (see instructions)		
SETHU SANDEEP CHOWDARY KADIYALA 7								-81-2	,	
		per and street). If you have a P.O. box					,02	01 2	Apt. no.	
		AND MESA RD							9-206	
City, town, or po	ost of	fice. If you have a foreign address, als	so complet	e spaces below.		State		ZIP co	de	
FLAGSTAFF						AZ		8600	1	
Foreign country	nam	9	Foreign p	rovince/state/county	1	Foreig	n postal co	ode		
Filing Status Check only one box.	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende eck only							state	Trust	
Digital Assets		ny time during 2023, did you: (a) receir rwise dispose of a digital asset (or a fi								
Dependents						(4)	Check the b	- i	ies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship	to vou C	hild tax cre	ait i -	redit for other dependents	
		()		, 0						
If more than four dependents, see										
instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	•	,					11,720.	
Effectively	b	Household employee wages not rep						-		
	c d	Tip income not reported on line 1a (s Medicaid waiver payments not repor								
With U.S. Trade or	u e	Taxable dependent care benefits fro		() (,					
Business	f	Employer-provided adoption benefit		-						
Duomooo	g	Wages from Form 8919, line 6		3						
Attach Form(s) W-2,	h	Other earned income (see instruction	. 11	1 I						
1042-S,	i	Reserved for future use			1 i					
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1		. 1	i		
and 8288-A	k	Total income exempt by a treaty from		. ,						
here. Also attach	_						- 1		11,720.	
Form(s)	z 2a	Add lines 1a through 1h		 h Ta					11,720.	
1099-R if tax was	2a 3a	Qualified dividends 3a			rdinary dividends					
withheld.	4a	IRA distributions 4a			axable amount .			-		
lf you did not	5a	Pensions and annuities 5a			axable amount .			b		
get a Form W-2, see	6	Reserved for future use					. 6			
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,	•					
	8	Additional income from Schedule 1 (•	,.						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	-						11,720.	
10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your t income							. 10			
	11	Subtract line 10 from line 9. This is y						1	11,720.	
-	12	Itemized deductions (from Schedu deduction (see instructions)							13,850.	
	13a	Qualified business income deduction				volinaia i		<u>-</u>		
	b	Exemptions for estates and trusts or								
	c	Add lines 13a and 13b		,			. 13	с		
-	14								13,850.	
	15	Subtract line 14 from line 11. If zero	or less, ent	ter -0 This is your t a	axable income		. 19	5	0.	
For Disclosure, I	Priva	cy Act, and Paperwork Reduction Act	Notice, se	e separate instructio	ons.			Form 10	040-NR (2023)	

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.
redits	17	Amount from Schedule 2 (Form						. 17	0.
	18	Add lines 16 and 17							0.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (Form 10	040)		. 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 con							
		Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo							
		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							
aymento	a	Form(s) W-2				25a	24	8	
	b	Form(s) 1099				25b		<u> </u>	
	c	Other forms (see instructions)				255 25c			
	d	Add lines 25a through 25c						. 25d	248.
	e	Form(s) 8805							210.
	f	Form(s) 8288-A						. 25e	
								. 25g	
	g	Form(s) 1042-S							
	26						• •	. 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 a	-						
	33	Add lines 25d, 25e, 25f, 25g, 26,							248.
efund	34	If line 33 is more than line 24, sul				-	_		248.
	35a	Amount of line 34 you want refu							248.
ect deposit? e instructions.	b	Routing number 1 2 2 1					Saving	js	
e instructions.	d	Account number 4 5 7 0							
	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 appl	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. Co	mplete be	elow. 🛛 No
arty	Desig	nee's		Phone		Perso	nal ide	ntification	
esignee	name						er (PIN	/	
		penalties of perjury, I declare that I have							
an		they are true, correct, and complete. D	eclaration	ot preparer (other t					, ,
gn								sent you an Identity	
ere					שיאים רוז וחס				PIN, enter it here
	DI			E a all a dd	STUDENT		(9	see inst.)	
	Phone		Dronores	Email address		Data	PTIN		
aid	•	rer's name	•	's signature		Date			Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		RIYA RAM SAGAH	R GUPTA TALLAM	03/01/2024		082703	Self-employed
reparer							Dham	ana (C	701065 0500
	Firm's	address 245 ROONEY C					Phon Firm'		78)965-9522 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

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Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Your identifying number	
Attachment Sequence No.	7

SETHU SANDEEP CHOWDARY KADIYALA

752-81-2863

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

	Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other	er (specify)		
			Nature of Income					(c) 30%	%	%	
1	Dividends and divide	nd eq	uivalents:								
а	Dividends paid by U.	S. cor	porations		1a						
b	Dividends paid by fo	reign d	corporations		1b						
с	Dividend equivalent p	aymer	nts received with respect to section 871(m	n) transactions	1c						
2	Interest:	•									
а	Mortgage				2a						
b			18		2b						
c					2c						
3			s, trademarks, etc.)		3						
4	• •		ight royalties		4						
5			, recording, publishing, etc.)		5						
6			natural resources royalties		6						
7					7						
8					8						
9			elow		9						
10 10		s of C	anada only. Enter net income in column		5						
а	Winnings										
b	Losses				10c						
11	Gambling-Resident	s of c	ountries other than Canada.								
	Note: Enter winnings	s only.	Losses aren't allowed		11						
12	Other (specify):										
					12						
13	0		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 busin	ness. Add colum	ins (a) i	through (d) of line 14	 Enter the total here 	e and on Form 1040	-NR, line 23a 15		
			Capital Gains a	and Losses F	rom	Sales or Excha	nges of Proper	ty			
losses f exchan within t	nly the capital gains and from property sales or ges that are from sources the 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).	
	vely connected with a U.S.										
or loss	on disposing of a U.S. real										
gains a	ty interest; report these nd losses on Schedule D										
(Form 1											
	property sales or ges that are effectively										
connec	edule D (Form 1040).	17	Add columns (f) and (g) of line 16 .					17			
	1797, or both.	18	Capital gain. Combine columns (f) an	nd (g) of line 17	'. Ente	r the net gain her	e and on line 9 abo	ove. If a loss, ente	r-0 18		

SCHE	DULE	0
(Form	1040-1	√R)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074 2023

	nent of the Treasury GO Revenue Service	to www.irs.gov/Form1040 An	NR for instructions and swer all questions.	the latest information.	Attachm	ent ce No. 7C
Name s	hown on Form 1040-NR				Your identifying numbe	
SETH	IU SANDEEP CHOWDARY	KADIYALA			752-81-2863	
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					
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?					
D	Were you ever:					
	A U.S. citizen?					
2.	2. A green card holder (lawful permanent resident) of the United States?					
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.					
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 year.					
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 during 2023. 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 or Mexico and skip to item H					
	Date entered United States	Date departed United Sta	ates Da	te entered United States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/	уу
н	Give number of days (including	vacation. nonworkdavs. a	nd partial days) you were	present in the United S	states during:	
	H Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2021 , 2022 , and 2023 365					
I	Did you file a U.S. income tax	return for any prior year?			🛛 🗡 Ye	es 🗌 No
J	If "Yes," give the latest year and form number you filed: <u>1040NR</u> Are you filing a return for a trust?					
К	Did you receive total compensation of \$250,000 or more during the tax year?					s 🛛 No
	If "Yes," did you use an altern					
L	Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign countr 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 treaty benefit, and 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 year		
2	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1					
	Were you subject to tax in a foreign country on any of the income shown in 1(d) above?					es 🗌 No
	Are you claiming treaty benefits pursuant to a Competent Authority determination?					es 🛛 No
	If "Yes," attach a copy of the		-			
м	Check the applicable box if:		-		d Otataa affy'	h

This is the first year you are making an election to treat income from real property located in the United States as effectively connected 1.

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

BAA

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

REV 02/22/24 PRO Schedule OI (Form 1040-NR) 2023