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	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, 2	0	See separate instructions.	
Your first name and middle initial		Last name Y			Your identifying number				
							(see instructions)		
KRISHNA SAI			RAMI	NENI			695-56-0419		
Home address (number and street). If you have a P.O. box				structions.				Apt. no.	
6901 S CU	JSTE	R RD						5415	
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZII	P code	
MCKINNEY						TX	7.	5070	
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign p	ostal code		
Filing		Single	arately (N	MFS) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ng surviving spouse (C	088)	☐ Estate	e 🔲 Trust	
Status		you checked the QSS box, enter the							
Check only				a ii ii qaayg po	30a a aa aaa.,	ou. dopo.			
one box.									
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a t					(b) sell, exc		
Dependents	+				, , ,			qualifies for (see inst.):	
(see instructions)			(2) Dependent's				tax credit	Credit for other	
(,		(1) First name Last name		identifying number	(3) Relationship to you	1 011110		dependents	
If more than four									
dependents, see									
instructions and check here							<u> </u>		
		Tababasas at francisco Faces (a) W. O. Inc.	4 (1					14 002	
Income	1a	Total amount from Form(s) W-2, box	`	,			1a	14,003.	
Effectively	b	Household employee wages not rep		` '			1b		
Connected	C C	Tip income not reported on line 1a (Medicaid waiver payments not repo		,			1c		
With U.S.	d	Taxable dependent care benefits from		` ' ` `	,		1d 1e		
Trade or	e f	•		*			1f		
business	usiness f Employer-provided adoption benefits from Form 8839, line 29								
Attach	g h	•					1g 1h		
Form(s) W-2, 1042-S,	orm(s) W-2,								
SSA-1042-S,	712 0,								
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		1j		
and 8288-A here. Also		line 1(e)			1k				
attach	z	Add lines 1a through 1h					1z	14,003.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	b Tax	kable interest		2b		
tax was	За	Qualified dividends 3a	a	b Ord	dinary dividends		3b		
withheld.	4a	IRA distributions 4a	3	b Ta:	kable amount		4b		
If you did not	5a	Pensions and annuities 5a	a	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							
	8	Additional income from Schedule 1							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	s your total effectively o	connected income .		9	14,003.	
	10	Adjustments to income from Schedincome	10						
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			11	14,003.	
	12	Itemized deductions (from Schedu							
		deduction (see instructions)	ty 12	13,850.					
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts o	• .	•					
	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	153.	

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	314 2 497	2 3 🗌		16	16.
Credits	17	Amount from Schedule 2 (Form 1)	040), line	3				17	0.
	18	Add lines 16 and 17	18	16.					
	19	Child tax credit or credit for other	19						
	20	Amount from Schedule 3 (Form 1)	20						
	21	Add lines 19 and 20	21						
	22	Subtract line 21 from line 18. If ze	ro or less	s, enter -0				22	16.
	23a	Tax on income not effectively con	nected w	rith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), lii	ne 15 .			23a			
	b	Other taxes, including self-employ	yment ta	x, from Schedule	e 2 (Form 1040),				
		line 21				23b			
	С	Transportation tax (see instruction	ns)			23c			
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is your	total ta	x				24	16.
Payments	25	Federal income tax withheld from							
•	а	Form(s) W-2				25a	355.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	355.
	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				27			
	28	Additional child tax credit from So				28			
	29	Credit for amount paid with Form	1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1)				31			
	32	Add lines 28, 29, and 31. These a	32						
	33	Add lines 25d, 25e, 25f, 25g, 26, a	33	355.					
Refund	34	If line 33 is more than line 24, sub	34	339.					
	35a	Amount of line 34 you want refun	ded to y	ou . If Form 8888	is attached, chec	k here		35a	339.
Direct deposit?	b	Routing number X X X X	XX	XXX	c Type:	Checking	Savings		
See instructions.	d	Account number X X X X	ХХ	X X X X	X X X X X	X X X			
	е	If you want your refund check ma	iled to ar	n address outsid	e the United State	es not shown on	page 1,		
		enter it here.							
	36	Amount of line 34 you want application							
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 instructions .			37	
	38	Estimated tax penalty (see instruc							
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								ow. 🛛 No
Party	Desig	Designee's Phone Personal identi						cation	
Designee	name no number (PIN)								
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
Sign	Yours	signature		Date Your occupation			If the	RS se	ent you an Identity
Here							Prot	ection F	PIN, enter it here
	STUDENT (see							inst.)	
	Phone no. Email address								
Paid	Prepa	reparer's name Preparer's signature Date PTIN					PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	IYA RAM SAGAR	GUPTA TALLAM	03/11/2024	P02082	2703	Self-employed	
Use Only	Firm's name GLOBAL TAXES LLC Phone no								78)965-9522
OSE OIIIY	Firm's	N 8	4-3171965						

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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 KRISHNA SAI RAMINENI 695-56-0419 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
					(a) 1076 (b) 1376	(6) 30%	%	%		
1	Dividends and divide	nd ec	uivalents:							
а	Dividends paid by U.	S. co	rporations		1a					
b	Dividends paid by fo	lends paid by foreign corporations								
С	Dividend equivalent p	aymei	nts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	oratio	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	сору	right 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	es.			7					
8										
9	Capital gain from line	e 18 b	elow		9					
10		s of C	anada only. Enter net income in column (c							
а	Winnings									
b	Losses				10c					
11	Gambling—Resident Note: Enter winnings	s of c	ountries other than Canada. Losses aren't allowed		11					
12										
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines	ss. Add colum	ns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040	-NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	inges 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 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.									
business. Do not include a gain or loss on disposing of a U.S. real										
gains ai	y interest; report these nd losses on Schedule D									
(Form 1	•									
	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040).									
	797, or both.	18	Capital gain. Combine columns (f) and	(g) of line 17	'. Ente	er the net gain her	e 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.

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

OMB No. 1545-0074 Attachment Sequence No. **7C**

Internal Revenue Service

Name s	hown on Form 1040-NR		Your identifying number									
KRIS	SHNA SAI RAMINENI				695-56-0	419						
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	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.	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.											
Е	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 v If you answered "Yes," indicate	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immig e change:	ration status?		☐ Yes	⊠ No					
G	List all dates you entered and	left the United States durin	g 2023. See instru	ctions.								
	Note: If you're a resident of C				_							
	check the box for Canada or				☐ Mexico							
	Date entered United States	Date departed United State	es	Date entered United State		arted United State						
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy	п/аа/уу					
			_									
			<u> </u>									
н	Give number of days (including	vacation nonworkdays and	 I nartial dave) vou v	were present in the United	States during:							
_	2021	, 2022	, and	d 2023 365			S Z					
ı	Did you file a U.S. income tax If "Yes," give the latest year ar					∐ Yes	⊠ No					
J	Are you filing a return for a trus	st?				☐ Yes	⊠ No					
	If "Yes," did the trust have a l					_	_					
	U.S. person, or receive a contr	· ·				☐ Yes	☐ No					
K	Did you receive total compensation of \$250,000 or more during the tax year?											
	If "Yes," did you use an alternative method to determine the source of this compensation?											
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, 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) Cou	ntry	(b) Tax treaty arti	cle (c) Number of montl claimed in prior tax ye								
	(e) Total. Enter this amount or		-									
	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:	aldan on alantisus to tur. I !		opposite de parte el la dese de la 1900.	ad Ctate '	fa ath b -						
	This is the first year you are may with a U.S. trade or business u	ınder section 871(d). See ir	structions									
2.	You have made an election in States as effectively connected											

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