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)

Taxpay	er's name	Social securit	ty numbe	er					
SAI	KUMAR REDDY KATTA	392-35-7654							
Spous	s's name	Spouse's social security number							
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you a	re aut	horizing.)					
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	20,628.					
2	Total tax		2	678.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2,470.					
4	Amount you want refunded to you		4	1,792.					
5	Amount you owe		5						
Par	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)								

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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

as my

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.

Your signature K. Sal

Date 19-03-2024

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 signature ►	Da	te 🕨	•								
Practitioner PIN Method Returns Only—continue below											
Part III Certification and Authentication – Practitioner PIN Metho	d Only										
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	d PIN.	2	2				 0 8	_	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 Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Paperwork Reduction Act Notice, see your tax return instructions.		REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)			

1040)	NR Department of the Treasury-Inte U.S. Nonresident AI	rnal Revenue Se ien Incom	^{rvice} Ie Tax Return	2023	OMB No.	1545-0074	or sta	Only-Do not write ple in this space.
For the year Jan	n. 1–	Dec. 31, 2023, or other tax year begin	ning	, 2023, e	ending		, 20		ee separate
Your first name			Last name				Your i	dentifyi	ing number
								structio	,
SAI KUMAR			KATTA				392	-35-1	
Home address (2113 CANN		ber and street). If you have a P.O. bo	k, see instructi	ons.					Apt. no.
		office. If you have a foreign address, a	so complete s	paces below.		State		ZIP co	_l ode
CARROLLTO						TX		7500	06
Foreign country		ne	Foreign prov	vince/state/county		Foreig	n postal c		
	1								
Filing		Single 🛛 Married filing sep	arately (MFS)		g surviving spous	e (088)		state	Trust
Status		you checked the QSS box, enter the		-				otato	
Check only							•		
one box.	-								
Digital Assets	oth	any time during 2023, did you: (a) rece erwise dispose of a digital asset (or a	financial intere	est in a digital asset)	? (See instruction	services) s.)	; or (b) sen	, exchai	Yes X No
Dependents				<u> </u>	`				lifies for (see inst.):
(see instructions):				(2) Dependent's			Child tax cre		Credit for other
		(1) First name Last name	IC	lentifying number	(3) Relationship to	you		-	dependents
If more than four									<u> </u>
dependents, see									
instructions and check here									
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see instru	ctions)			1	a	20,628.
Effectively	b	Household employee wages not rep		,					
Connected	с	Tip income not reported on line 1a						c	
With U.S.	d	Medicaid waiver payments not repo	rted on Form(s) W-2 (see instructi	ons)		10	d	
Trade or	е	Taxable dependent care benefits fro	om Form 2441	, line 26....			1	e	
Business	f	Employer-provided adoption benefi	ts from Form 8	3839, line 29			1	f	
Attach	g	Wages from Form 8919, line 6							
Form(s) W-2,	h	Other earned income (see instructio					1	h	
1042-S, SSA-1042-S,	i	Reserved for future use							
RRB-1042-S,	J	Reserved for future use			1 1	• •	1	J	
and 8288-A	к	Total income exempt by a treaty fro line 1(e)							
here. Also attach	z	Add lines 1a through 1h					1:	7	20,628.
Form(s)	- 2a	Tax-exempt interest 2	1	1	able interest				
1099-R if tax was	3a	Qualified dividends 3	a		inary dividends .			b	
withheld.	4a	IRA distributions 4	a	b Taxa	able amount		4	b	
If you did not	5a	Pensions and annuities 5	a	b Taxa	able amount		5	b	
get a Form W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Sched							
	8	Additional income from Schedule 1							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	-)	20,628.
	10	Adjustments to income from Scheolincome	•	040), line 26. These 	•	-		o	
	11	Subtract line 10 from line 9. This is	our adjusted	gross income .			1	1	20,628.
	12	Itemized deductions (from Scheduction (see instructions)						2	13,850.
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts o	nly (see instru	ctions)					
	с	Add lines 13a and 13b					13	lc	
	14							4	13,850.
· · · · · · · · · · · · · · · · · · ·	15	Subtract line 14 from line 11. If zero			able income		1		6,778.

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

Form **1040-NR** (2023)

Form 1040-NR (2	2023)		Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16 678.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17 0.
	18	Add lines 16 and 17	18 678.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	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 zero or less, enter -0	22 678.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	-
	с	Transportation tax (see instructions)	-
	d	Add lines 23a through 23c	23d
	24	Add lines 22 and 23d. This is your total tax	24 678.
Dovmonto	25	Federal income tax withheld from:	070.
Payments	25 a	Form(s) W-2	
	b	Form(s) 1099	-
	c	Other forms (see instructions)	-
	d	Add lines 25a through 25c . <th>25d 2,470.</th>	25d 2,470.
		Form(s) 8805	250 27 7 7 7 7 7 7 7 7 7
	e f	Form(s) 8288-A	25e
			25g
	g	Form(s) 1042-S .	259
	26 27		20
		Reserved for future use 27 Additional shild tay and it form Calcula 2010 (Form 1040) 27	-
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28	-
	29 00	Credit for amount paid with Form 1040-C	-
	30	Reserved for future use 30 A word for 0 cloud (a 0 / 5 word 0 40) (bood 5 24	-
	31	Amount from Schedule 3 (Form 1040), line 15	
	32 33	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32 33 2,470.
Defend	34	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	,
Refund	34 35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	34 1,792. 35a 1,792.
Direct deposit?	b 35a	Routing number $\begin{vmatrix} 1 & 1 & 0 & 0 & 0 & 6 & 1 & 4 \end{vmatrix}$ c Type: \square Checking \square Savings	33 1, 792.
See instructions.		Account number 5 8 1 6 1 9 1 8 9	
	d		
	е	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.	-
	36	Amount of line 34 you want applied to your 2024 estimated tax 36	
Amount	37	Subtract line 33 from line 24. This is the amount you owe .	
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37
	38	Estimated tax penalty (see instructions)	
Third	Do yo	bu want to allow another person to discuss this return with the IRS? See instructions.	lete below. X No
Party Designee	Desig name	nee's Phone Personal identifier no. number (PIN)	ication
-		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	
Sign	Your		e IRS sent you an Identity
Here			ection PIN, enter it here
-			inst.)
	Phone		
Paid	•	arer's name Preparer's signature Date PTIN	Check if:
Preparer		4 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/20/2024 P02082	
Use Only		s name GLOBAL TAXES LLC Phone n	
		s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E	
Go to www.irs.g	gov/Foi	rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form 1040-NR (2023)

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

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

SAI KUMAR REDDY KATTA

20 Attachment Sequence No. 7B Your identifying number

392-35-7654

Enter	amount of income und	er the	appropriate rate of tax. See instructions.			1		1		
			Nature of Income			(a) 10%	(b) 15%	(c) 30%	. ,	r (specify)
						.,	.,	.,	%	%
1	Dividends and divide									
а	Dividends paid by U		•		1 a					
b		•	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) to	ransactions	1c					
2	Interest:									
а					2a					
b			าร		2b					
С					2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	сору	ight royalties		4					
5		-	, recording, publishing, etc.)		5					
6			natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security bene	fits .			8					
9	Capital gain from line	e 18 b	elow		9					
10	Gambling—Resident	ts of C r -0	anada only. Enter net income in column (c).						
а	Winnings									
b	Losses				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	s. Add colun	nns (a) i	through (d) of line 1	4. Enter the total here	and on Form 1040	D-NR, line 23a 15	
			Capital Gains and	d Losses	From	Sales or Excha	anges of Proper	ty		
losses exchan within t	nly the capital gains and from property sales or ges that are from sources the United States and not	n property sales or that are from sources (if necessary, attach statement of descriptive details not shown below)		(b) Date acq 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).
effectively connected with a U.S. business. Do not include a gain										
or loss	on disposing of a U.S. real ty interest; report these									
gains a	nd losses on Schedule D									
(Form 1										
exchan	property sales or ges that are effectively							<u> </u>		
connec	ted with a U.S. business edule D (Form 1040),									
	1797, or both.	18	Capital gain. Combine columns (f) and	(g) of line 1	7. Ente	er the net gain he	re and on line 9 abo	ove. If a loss, ente	er -0 18	
For Pa	aperwork Reduction A	ct Not	ice. see the Instructions for Form 1040-NR	·		BAA REV	03/07/24 PRO		Schedule NEC	(Form 1040-NR) 2023

SCHE	DUL	e oi
(Form	1040-	NR)

Other Information

Attach to Form 1040-NR.

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

2023 Attachment Sequence No. 7C

OMB No. 1545-0074

Answer al	l questions.
Allswei al	i uuesuons.

Department of the Treasury Internal Revenue Service	
Name shown on Form 10/0	

Name sł	hown on Form 1040-NR				Your identifying numb	er
SAI	KUMAR REDDY KATTA				392-35-7654	
Α	Of what country or countries were you a citiz					
в	In what country did you claim residence for	ax purposes durir	ng the tax year?	United States		
С	Have you ever applied to be a green card hold					
D	Were you ever:					
1.	A U.S. citizen?				🗆 🛛	′es 🛛 No
2.	A green card holder (lawful permanent reside	nt) of the United S	tates?		🗆 🗎	′es 🛛 No
	If you answer "Yes" to (1) or (2), see Pub. 519	•	•			
E	If you had a visa on the last day of the tax immigration status on the last day of the tax y	≏ar ⊡1		lidn't have a visa, ente	,	
F	Have you ever changed your visa type (nonin If you answered "Yes," indicate the date and	nature of the chan	ige:		····	∕es ⊠No
G	List all dates you entered and left the United Note: If you're a resident of Canada or Mexic check the box for Canada or Mexico and s	States during 2023 co AND commute	 See instruction to work in the L 	s. Jnited States at freque		
		l United States dd/yy	Dat	e entered United States mm/dd/yy	Date departed t mm/de	
н	Give number of days (including vacation, nonw 2021, 2022			•	•	
I	Did you file a U.S. income tax return for any p	prior year?			🗆 🗎	′es 🛛 No
	If "Yes," give the latest year and form numbe	r you filed:				
J	Are you filing a return for a trust?				[]	′es 🛛 No
	If "Yes," did the trust have a U.S. or foreign U.S. person, or receive a contribution from a					
κ	Did you receive total compensation of \$250,0	-	-			
L	If "Yes," did you use an alternative method to Income Exempt From Tax-If you are claim	ing exemption fro	m income tax u	nder a U.S. income ta		
	complete (1) through (3) below. See Pub. 901					
1.	Enter the name of the country, the applicable amount of exempt income in the columns below				claimed the treaty b	enefit, and the
	(a) Country	(b) ⊺	ax treaty article	(c) Number of months claimed in prior tax yea		•
	(e) Total. Enter this amount on Form 1040-N	R, line 1k. Do not	enter it anywhere	e else on line 1		
2.	Were you subject to tax in a foreign country of	on any of the incon	ne shown in 1(d)	above?	🗍	'es 🗌 No
3.	Are you claiming treaty benefits pursuant to a	-	-		🗆 Y	′es 🛛 No
_	If "Yes," attach a copy of the Competent Aut	nority determinatio	on letter to your re	eturn.		
M	Check the applicable box if:					
1.	This is the first year you are making an election			-		ely connected
~	with a U.S. trade or business under section 8			· · · · · · · · ·		· · · []
	You have made an election in a previous yes States as effectively connected with a U.S. tr	ade or business ur	nder section 871		<u> </u>	🗌
For Pa	perwork Reduction Act Notice, see the Instruc	tions for Form 104	40-NR. ВА	AA REV 03/07/24 PRO	Schedule OI (Forn	n 1040-NR) 2023