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.

Your first name and middle initial ANANDI AN	For the year Jan. 1-Dec. 31, 2023, or other tax year beginn				ning, 2023, ending, 2				See separate instructions.		
ANANDI GANGULT	Your first name and middle initial							Your identifying number			
Apt. no. Logo and street), If you have a P.O. box, see instructions. Apt. no. US102	AMANDI			CANC	TIT T			`	,		
1040 JEPERRSON COMMONS CINCLE SATIVE PAUL Foreign province/state/county Foreign postal code SATIVE PAUL Foreign province/state/county Foreign postal code Foreign province/state/county Foreign postal code Foreign province/state/county Foreign postal code If you checked the QSS box, enter the child's name if the qualifying surviving spouse (QSS) Estate Trust Check conty one box. Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) If more than four dependents, see instructions and check here Trust interest in a digital asset (or a financial interest in a digital asset)? (Beat instructions) If more than four dependent, see instructions and check here Trust instructions instructions and check here Trust instructions and check here Trust instructions and check here Trust instructions instructions and check here Trust instructions and check here Trust instructions and check here Trust instructions Tr								652-			
City, town, or post office. If you have a foreign address, also complete spaces below. SAINT PAUL Foreign prowince/state/county Foreign postal code Filing Status Filing Status Single Married filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Foreign postal code Filing Status Filing Status Single Married filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Foreign postal code Filing Status Filing Status Filing Status Filing Status Single Married filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Foreign postal code Filing Status Filing Status		`	, ,	, see iiis	tructions.				· ·		
SALINE PAUL Foreign province/state/county Foreign province/state/county Foreign postal code				so comp	loto spaces bolow		State				
Filing Status Check only one box. At any time during 2023, did you; (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) Dependents (ein instructions and instructions and dependents, see instructions) If more than four dependents, see instructions, and dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here If or the instructions If or the instru			nice. Il you have a loreigh address, al	so comp	ilete spaces below.						
Status Check only one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: (a) Check the box if cardises for fees leafly in the child in t			ΙΔ	Foreign	n province/state/county						
Status Check only one box. Digital Assets If you checked the OSS box, enter the child's name if the qualifying person is a child but not your dependent: one box. Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) self, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). If more than four dependents, see instructions and check here If more than four dependents, see instructions and check here Trade or Business If more dependents, see instructions and check here Trade or Business At a my time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) self, exchange, or otherwise dispose of a digital asset)? (See instructions). If more than four dependents, see instructions and check here instructions in the found of the check here instructions in the found of the check here instructions in the check here in the check here instructions in the check here instructions in the check instructions in the check instructions in the check in	1 oreign country	Παπ		l oreigi	r province/state/county		rorcigiri	303141 000			
Check only one box. Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Vest No. Yes Yes Yes No. Yes Ye	Filing Status		• .	• •	•	0 .	,		ate Trus	st	
Otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions).	Check only one box.	If 	you checked the QSS box, enter the c	child's na	ame if the qualifying pers	son is a child but not	your dep	endent:			
(1) First name Last name (2) Dependent's (3) Relationship to you Child tax credit Condition of the dependents Child tax credit Condition of the dependents Child tax credit Child tax c	Digital Assets									No	
Credit for other contents Content Conten	Dependents						(4) Ch	eck the box	if qualifies for (see in	nst.):	
If more than four dependents, see instructions and check here	-		(1) First name		, , ,	(2) Polationabin to ve	Chi	d tax credi	T		
dependents, see instructions and check here Income			(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents		
dependents, see instructions and check here 1a Total amount from Form(s) W-2, box 1 (see instructions) 1b Household employee wages not reported on Form(s) W-2 1b Trade or 1c Trade or 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Medicaid waiver payments not reported on Form 8919, line 6 1f	If more than four							-	+ +		
Income Income								-			
Total amount from Form(s) W-2, box 1 (see instructions)											
Household employee wages not reported on Form(s) W-2 1b		10	Total amount from Form(s) W 2 have	(1 (soo i	netructions)			10	3 20	\cap	
Connected With U.S. dwith U.S. d				,	,				3,20	<u> </u>	
With U.S. d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d	_										
Trade or Business					•						
## Susiness f Employer-provided adoption benefits from Form 8839, line 29 1f 1g 1g 1g 1g 1g 1g 1g											
Attach Form(s) W-2, 1042-S, 1042-S, RRB-1042-S, RR-1042-S, RR-1042-S, RR-1042-S, RR-1042-S, RR-1042-S, RR-1042-S,			•		·						
Attach Form(s) W-2, 1042-S, SSA-1042-S, RBB-1042-S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2 is a did lines 12, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income your total adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). India and trusts only (see instructions). India and	Business				·						
i Reserved for future use			•								
SSA-1042-S, and 828-A here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 11 Subtract line 10 from line 9. This is your adjusted gross income 12 Itemized deduction (see instructions) 13 Pesserved for future use 14 Add lines 12 and 13b 15 Pesserved for future use 16 Pesserved for future use 17 Capital gain or (loss). Attach Schedule D (Form 1040), line 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 16 Subtract line 10 from line 9. This is your adjusted gross income 17 Itemized deduction (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) 18 Exemptions for estates and trusts only (see instructions) 19 Add lines 12 and 13c 10 Add lines 12 and 13c 10 Add lines 12 and 13c 11 Add lines 12 and 13c 11 Add lines 12 and 13c 12 Itemized for future use 13 Pesserved for future use 14 Add lines 12 and 13c 15 Pesserved for future use 16 By Taxable interest 18 Taxable interest 19 Details interest 20 Details interest 21 Details interest 22 Details interest 23 Details interest 24 Details interest 25 Details interest 26 Details interest 26 Details interest 26 Details interest 27 Capital gain or (loss). Attach Schedule Details interest 28 Details interest 29 Details interest 20 Details interest 21 Details interest 22 Details interest 24 Details interest 25 Details interest 26 Details interest 26 Details interest 27 Capital gain or (loss). Attach Schedule Details interest 28 Details interest 29 Details interest 20 Details interest 20 Details interest 20 Detail		i									
Total Income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1k 3,200.		j	Reserved for future use					. 1j			
2 Add lines 1a through 1h 1z 3,200	and 8288-A	k									
Form(s) 1099-R if tax was withheld. 4a		7	- (-)					. 12	3,20	0.	
109-R If tax was withheld. 4a IRA distributions				1	1	able interest					
withheld. 4a IRA distributions			•	_	b Ord	dinary dividends .					
Get a Form W-2, see instructions. 6 Reserved for future use		_				-					
Get a Form W-2, see instructions. 6 Reserved for future use	If you did not	5a		_							
To apital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here	get a Form	6	Reserved for future use								
Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income Bubtract line 10 from line 9. This is your adjusted gross income Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) Add lines income deduction from Form 8995 or Form 8995-A Bubtract line 10 from line 9. This is your adjusted gross income In the income In the income In the income income from Schedule A (Form 1040-NR)) In the income inc		7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If n	ot required, check he	ere [7			
Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income		8	Additional income from Schedule 1	. 8							
income 10 11 Subtract line 10 from line 9. This is your adjusted gross income 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) 13 Qualified business income deduction from Form 8995 or Form 8995-A 14 Add lines 12 and 13c 15 June 10 16 June 10 17 June 10 18 June 10 18 June 10 19 June 10 10 11 June 20 12 June 20 13 June 20 13 June 20 13 June 20 13 June 20 14 June 20 15 June 20 16 June 20 17 June 20 18 June 20 18 June 20 18 June 20 19 June 20 10 June 20 10 June 20 10 June 20 11 June 20 12 June 20 13 June 20 13 June 20 14 Jule 20 15 June 20 16 June 20 17 June 20 18 June 20 19 June 20 19 June 20 10 June		9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	B. This is	your total effectively c	onnected income		. 9	3,20	0.	
12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 13,850. 13a Qualified business income deduction from Form 8995 or Form 8995-A. 13a 13a b Exemptions for estates and trusts only (see instructions). 13b c Add lines 13a and 13b 13c 14 Add lines 12 and 13c 13,850.											
deduction (see instructions)		11	Subtract line 10 from line 9. This is y	. 11	3,20	0.					
13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 13a 13b 13b 13b 13c		12			12 05	. ()					
b Exemptions for estates and trusts only (see instructions) 13b 13b c Add lines 13a and 13b 13c 13c 14 Add lines 12 and 13c 14 13,850		120		4-cy 12	13,63	<u> </u>					
c Add lines 13a and 13b 13c 14 Add lines 12 and 13c 13,850											
14 Add lines 12 and 13c								130			
										0	

Tax and	16	Tax (see instructions). Check if any from F	Form(s): 1	314 2 🗌 497	2 3 \square	1	16 0			
Credits	17	Amount from Schedule 2 (Form 1040), li	ne3			<u>1</u>	17 0			
	18	Add lines 16 and 17				1	18 0			
	19	Child tax credit or credit for other depen	dents from Sched	ule 8812 (Form 10	40)	1	19			
	20	Amount from Schedule 3 (Form 1040), lin	ne 8			2	20			
	21	Add lines 19 and 20					21			
	22	Subtract line 21 from line 18. If zero or le	ess, enter -0			2	22 0	-		
	23a	Tax on income not effectively connected			1 1					
		Schedule NEC (Form 1040-NR), line 15			23a					
	b	Other taxes, including self-employment line 21	•	, , , , , , , , , , , , , , , , , , , ,	23b					
	С	Transportation tax (see instructions) .			23c					
	d	Add lines 23a through 23c				2	3d			
	24	Add lines 22 and 23d. This is your total	tax			2	24 0			
Payments	25	Federal income tax withheld from:								
_	а	Form(s) W-2			25a					
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c				2	5d			
	е	Form(s) 8805				2	5e			
	f	Form(s) 8288-A				2	25f			
	g	Form(s) 1042-S				2	5g			
	26	2023 estimated tax payments and amou	int applied from 20	22 return		2	26			
	27	Reserved for future use			27					
	28	Additional child tax credit from Schedule	e 8812 (Form 1040)	28					
	29	Credit for amount paid with Form 1040-	C		29					
	30	Reserved for future use			30					
	31	Amount from Schedule 3 (Form 1040), lin			31					
	32	Add lines 28, 29, and 31. These are your	total other paym	ents and refunda	ble credits	3	32			
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32	. These are your to	otal payments .		3	33			
Refund	34	If line 33 is more than line 24, subtract lin	ne 24 from line 33.	This is the amoun	nt you overpaid	3	34			
	35a	Amount of line 34 you want refunded to	you. If Form 8888	is attached, chec	k here	. 🗌 🖪	5a			
Direct deposit?	b									
See instructions.	d	Account number X X X X X X								
	е	If you want your refund check mailed to	an address outsic	le the United State	es not shown on	page 1,				
		enter it here.								
	36	Amount of line 34 you want applied to y	our 2024 estimat	ed 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	s.gov/Payments or	see instructions .		3	37 0			
	38	Estimated tax penalty (see instructions)			38					
Third	Do yo	u want to allow another person to discuss	s this return with th	ne IRS? See instru	ctions.	es. Complete	below. 🗵 No			
Party Designee	Desig name		Phone no.			nal identificat er (PIN)	ion			
200191100		penalties of perjury, I declare that I have examin				` '	est of my knowledge and	_		
		they are true, correct, and complete. Declaration								
Sign	Your	signature	Date	Your occupation		If the IR	S sent you an Identit	V		
Here							ion PIN, enter it here			
				STUDENT		(see ins	t.)			
	Phone	·	Email address							
Paid	Prepa	rer's name Prepar	er's signature		Date	PTIN	Check if:			
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA SYAM	PRIYA RAM	SAGAR GUPTA	04/01/2024	P0208270	3 Self-employe	€d		
	Firm's	Phone no.	(678) 965-9522	,						
Use Only	Firm's	address 245 DOONEY OF E I	יא עים דוווסנוום ב	T 00016		Firm's FIN		_		

Form 1040-NR (2023)

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 ANANDI GANGULI 652-98-6956 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 150/	(c) 30%	(d) Other (specify)				
ivature of income					(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd 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) trans	sactions	1c					
2	Interest:		Î						
а	Mortgage			2a					
b	Paid by foreign corpo	orations	[2b					
С			T	2c					
3	Industrial royalties (p	atents, trademarks, etc.)	[3					
4		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	es		7					
8	Social security benef	its	[8					
9		e 18 below	[9					
10	Gambling-Resident	s of Canada only. Enter net income in column (c).							
_	If zero or less, ente								
a	Winnings			10c					
ь 11	Losses Gambling—Resident	s of countries other than Canada	İ	100					
• •	Note: Enter winnings	s only. Losses aren't allowed		11					
12	Other (specify):								
				12					
13		12 in 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	ffectively connected with a U.S. trade or business. A						-NR, line 23a 15	
		Capital Gains and L	osses F	rom	Sales or Excha	nges of Propert	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not			(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. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
gains a	y interest; report these nd losses on Schedule D								
(Form 1	•								
exchan	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	of line 17.	. Ente	r the net gain here	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.

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

	snown on Form 1040-NR				Your identifying					
	NDI GANGULI				652-98-69	956				
A 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 ca		Yes	⊠ No						
D	Were you ever:					_	_			
						∐ Yes	⊠ No ⊠ No			
2.	. A green card holder (lawful permanent resident) of the United States? [
	If you answer "Yes" to (1) or (2), see Pu	•								
E	If you had a visa on the last day of the immigration status on the last day of the		• • • • • •	ou didn't have a visa, en	-					
F	Have you ever changed your visa type If you answered "Yes," indicate the dat	(nonimmigrant statuse and nature of the o	s) or U.S. immigi	ration status?		☐ Yes	⊠ No			
G	List all dates you entered and left the U	Inited States during	2023. See instru	ctions.						
	Note: If you're a resident of Canada or	r Mexico AND comn	nute to work in t	the United States at frequ	ent intervals,					
	check the box for Canada or Mexico	and skip to item H	<u>.</u> <u>.</u>	\square Canada	☐ Mexico					
	Date entered United States Date de mm/dd/yy	eparted United States mm/dd/yy		Date entered United States mm/dd/yy		rted Unite nm/dd/yy	d States			
Н	Give number of days (including vacation,	nonworkdays, and p	artial days) you v	vere present in the United S	States during:					
	2021, 202	22	, and	1 2023 365	·					
I	Did you file a U.S. income tax return for If "Yes," give the latest year and form n	r any prior year?				☐ Yes	⊠ No			
J	Are you filing a return for a trust?					☐ Yes	⊠ No			
	If "Yes," did the trust have a U.S. or fo									
	U.S. person, or receive a contribution f	rom a U.S. person?				☐ Yes	☐ No			
K	Did you receive total compensation of	\$250,000 or more du	uring the tax year	?		☐ Yes	⊠ No			
	If "Yes," did you use an alternative met	hod to determine the	e source of this o	compensation?		☐ Yes	☐ No			
L	Income Exempt From Tax—If you are complete (1) through (3) below. See Pu				tax treaty with	a foreign	country,			
1.	Enter the name of the country, the appli				claimed the tre	aty benefi	t, and the			
	amount of exempt income in the column					,	,			
	(a) Country		(b) Tax treaty artic	cle (c) Number of month	ıs (d) Am	mount of exempt				
			•	claimed in prior tax ye	ars income i	n current t	ax year			
	(e) Total. Enter this amount on Form 1		-			_				
2.	, , , , , , , , , , , , , , , , , , , ,									
3.	3. Are you claiming treaty benefits pursuant to a Competent Authority determination?									
• -	If "Yes," attach a copy of the Competent Authority determination letter to your return.									
М	Check the applicable box if:									
1.	with a U.S. trade or business under sec	ction 871(d). See inst	tructions	· · · · · · · · ·			🗆			
2.	You have made an election in a previ									
	States as effectively connected with a	J.S. trade or busines	ss under section	8/1(d). See instructions.			<u> ப</u>			