## Form **8879**

(Rev. January 2021)

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.

OMB No. 1545-0074

Submission Identification N	umber (SID)			-		
Taxpayer's name	Social securit	Social security number				
SURYA TEJA GAMIDI	141-55-	141-55-9675				
Spouse's name	Spouse's soci	Spouse's social security number				
Part I Tax Return Ir	nformation — Tax Year Ending December	<b>131,</b> 2023 (Ente	r vear vou a	re aut	horizina `	1
Enter whole dollars only on		2023 (Ento	year yearar	C dat	nonzing.,	<u>/</u>
-	use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	me			1	6	,929.
• •				2		0.
	withheld from Form(s) W-2 and Form(s) 1099			3		
4 Amount you want ref	( )			4		
-				5		0.
Part II Taxpayer De	claration and Signature Authorization (Be	sure you get and l	keep a cop	y of y	our retui	rn)
my knowledge and belief, it is return (original or amended) I a to send my return to the IRS ar for any delay in processing the Agent to initiate an ACH electropayment of my federal taxes on authorization is to remain in fur payment, I must contact the lousiness days prior to the payritaxes to receive confidential repersonal identification number Electronic Funds Withdrawal Companyer's PIN: check one is in a lauthorize in the initial signature on the initial figure in the initial signature i	e box only	e amounts in Part I above service provider, transmireceipt or reason for rejolicable, I authorize the U al institution account ind and the financial institution and the financial institution and the financial institution and the financial institution and and the financial institution and the financial institution and the financial institution requisititutions involved in the properties of the provided of the provided in the pr	we are the amounter, or electron of the tr. S. Treasury aricated in the taton to debit the electron estimates the authorization of the treatment of the treatme	ounts from cretical returns the discount of the control of the con	from the incurn originate sion, (b) the esignated to this accoording to this accoording to the ectronic paramowledge d, if applic to the ectronic paramowledge d, if applications to the ectronic paramowled	come tax for (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the able, my as my
below. Your signature ►		Date <b>▶</b>				
Consumals DIN, shoot and	have audio					
Spouse's PIN: check one I	box only		DINI			
I authorize	ERO firm name	to enter or generate		or five o	digits, but	as my
signature on the in-	come tax return (original or amended) I am now	authorizing.			all zeros	
I will enter my PIN	as my signature on the income tax return (origin your own PIN and your return is filed using the	al or amended) I am n				
Spouse's signature ▶		Date ►				
	Practitioner PIN Method Returns O					
Part III Certification	and Authentication — Practitioner PIN M	ethod Only				
ERO's EFIN/PIN. Enter you	ur six-digit EFIN followed by your five-digit self-se	elected PIN. 2 2	2 4 9 Don't ente	6 0 er all ze	8 2 7 ros	1
authorized to file for tax year i	c entry is my PIN, which is my signature for the electrindicated above for the taxpayer(s) indicated above. It PIN method and <b>Pub. 1345</b> , Handbook for Authorized	I confirm that I am subm	nitting this retu	rn in a	ccordance	
ERO's signature ▶		Date <b>▶</b>				
	ERO Must Retain This Form — Don't Submit This Form to the IRS Unle		Do So			

# 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	n. 1–C	Dec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20		See separate nstructions.	
Your first name and middle initial								Your identifying number		
							(see ins	(see instructions)		
SURYA TEJA GAMIDI						141-	141-55-9675			
	Home address (number and street). If you have a P.O. box, see instructions.								Apt. no.	
803 PATTE		-· -·-							С	
City, town, or p	, town, or post office. If you have a foreign address, also complete spaces below.							ZIP co		
DAYTON								454	19	
Foreign country name Foreign province/state/county Foreign posta						postal co	de			
	1									
Filing	×	Single Married filing sepa	☐ Es	tate	☐ Trust					
Status	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:									
Check only one box.										
	Δta	ny time during 2023, did you: (a) recei	ve (as a	reward award or navm	ent for property or se	ervices). O	r (h) sell	excha	nge or	
Digital Assets		erwise dispose of a digital asset (or a f							Yes 🔀 No	
Dependents						(4) Ch	eck the bo	x if qual	lifies for (see inst.):	
(see instructions):		(4) First same		(2) Dependent's	(0) Deletie e eleie te co	Chi	ld tax crec	lit (	Credit for other	
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou			dependents	
If more than four							-			
dependents, see										
instructions and check here										
	1a	Total amount from Form(s) W-2, box	( 1 (see i	netructions)			. 1a	$\top$	6 <b>,</b> 929.	
Income Effectively	b	Household employee wages not rep	,	,						
Connected	C	Tip income not reported on line 1a (s		• •						
With U.S.	d	Medicaid waiver payments not report		•						
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit		·			. 1f			
Business	g	Wages from Form 8919, line 6								
Attach	h	Other earned income (see instruction	. 1g							
1042-S,	rom(s) w-2,									
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040-NR), i	tem L,					
here. Also		line 1(e)			1k					
attach	Z	Add lines 1a through 1h					. 1z		6,929.	
Form(s) 1099-R if	<b>2</b> a	Tax-exempt interest 2a	_	<b>b</b> Tax	cable interest		. 2b	_		
tax was	3a	Qualified dividends 3a			dinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	_		kable amount			_		
If you did not get a Form	5a	Pensions and annuities 5a	_		kable amount					
W-2, see	N-2 see									
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,	•					
	8	Additional income from Schedule 1 (Form 1040), line 10							6,929.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your <b>total effectively connected income</b> Adjustments to income from Schedule 1 (Form 1040), line 26. These are your <b>total adjustments to</b>							0,929.	
	10	Adjustments to income from Sched income								
	11	Subtract line 10 from line 9. This is y		_	6,929.					
	12	Itemized deductions (from Schedu								
									13,850.	
	13a	deduction (see instructions)								
	b	Exemptions for estates and trusts or								
	С	Add lines 13a and 13b					. 130	>		
	14	Add lines 12 and 13c							13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b>	xable income .	<u>.</u>	. 15		0.	

Form 1040-NR (	2023)										Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any fro	om For	m(s): <b>1</b> 88	314 <b>2</b>	497	2 3	· 🗆		16	0.	
Credits	17	Amount from Schedule 2 (Form 1040	O), line	3						17	0.	
	18									18	0.	
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)								19		
	20	Amount from Schedule 3 (Form 1040), line 8										
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If zero	or less	s, enter -0						22	0.	
	23a	Tax on income not effectively connectively	cted w	rith a U.S. trade	or business	from						
		Schedule NEC (Form 1040-NR), line	15 .				23a					
	b	Other taxes, including self-employm	ent tax	x, from Schedule	e 2 (Form 1	1040),						
		line 21					23b					
	С	Transportation tax (see instructions)					23c					
	d	Add lines 23a through 23c								23d		
	24	Add lines 22 and 23d. This is your to	tal ta	x						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					<del>.</del> .			25d		
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2023 estimated tax payments and ar								26		
	27	Reserved for future use					27					
	28	Additional child tax credit from Sche	dule 8	812 (Form 1040)	)		28					
	29	Credit for amount paid with Form 10	40-C				29					
	30	Reserved for future use					30					
	31	Amount from Schedule 3 (Form 1040					31					
	32	Add lines 28, 29, and 31. These are					ble cr	edits		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33		
Refund	34	If line 33 is more than line 24, subtra								34		
	35a									35a		
Direct deposit?	b	Routing number X X X X X	XX	X X X	с Туре	e: 🗌	Check	ing $\square$	Savings			
See instructions.	d	Account number X X X X X							_			
	е	If you want your refund check mailed							page 1,			
		enter it here.										
	36	Amount of line 34 you want applied	to you	ır 2024 estimat	ed tax .		36					
Amount	37	Subtract line 33 from line 24. This is	the an	nount you owe.								
You Owe		For details on how to pay, go to www	w.irs.g	ov/Payments or	see instruc	ctions .				37	0.	
	38	Estimated tax penalty (see instruction	ns) .				38					
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								lete be	low. X No		
Party	Designee's Phone Personal identif											
Designee	name nonumber (F											
	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	Your signature		I	Date Your occupation				If th	e IRS s	ent you an Identity		
Here	Tour signature			Pate Tour occupation						PIN, enter it here		
	STUDENT (s					(see	inst.)					
İ	Phone no. Email address											
Paid	Prepa	rer's name Pre	parer'	s signature			Date		PTIN		Check if:	
Paid	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPT				UPTA	04/0	7/2024	72024 P02082703 ☐ Self-employe				
Preparer	Firm's name CIODAI TAVES IIC						Phone no. (678) 965-9522					
Use Only									Firm's E			

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#### **SCHEDULE NEC** (Form 1040-NR)

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

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

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number SURYA TEJA GAMIDI 141-55-9675 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(=) 100/	(h) 450/	(a) 200/	(d) Other (specify)		
			(a) 10%	<b>(b)</b> 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits						
9	Capital gain from line 18 below						
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	11 Gambling—Residents of countries other than Canada.  Note: Enter winnings only. Losses aren't allowed						
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
_15	Tax on income not effectively connected with a U.S. trade or business. Add colum					-NR, line 23a <b>15</b>	
	Capital Gains and Losses I	From	Sales or Excha	nges of Proper	ty		
losses fexchan	nly the capital gains and from property sales or ges that are from sources he United States and not (a) Kind of property and description (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).
	ely connected with a U.S. ss. Do not include a gain						
or loss	on disposing of a U.S. real y interest; report these						
gains a	nd losses on Schedule D						
(Form 1	040). property sales or						
exchan	ges that are effectively						
	797, or both. 18 Capital gain. Combine columns (f) and (g) of line 17	7. Ente	er the net gain her	e and on line 9 abo	ove. If a loss, ente	er-0   <b>18</b>	

#### SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

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

Answer all questions.

2023
Attachment
Sequence No. 7C

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number 141-55-9675 SURYA TEJA GAMIDI Of what country or countries were you a citizen or national during the tax year? \_INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . X No Were you ever: ⊠ No Yes 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε 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. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . . . . . . . . . Yes If you answered "Yes," indicate the date and nature of the change: List all dates you entered and left the United States during 2023. See instructions. G Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States **Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 \_\_\_\_\_\_, 2022 \_\_\_\_\_\_, and 2023 \_\_\_\_\_\_365 \_\_\_\_. ☐ Yes X No ı If "Yes," give the latest year and form number you filed: X No ☐ Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a No Yes Κ Yes ⊠ No ☐ No If "Yes," did you use an alternative method to determine the source of this compensation? . . . . . . . . . . . Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 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 months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? . . . . . . . . . . . . No Yes X 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 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