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

IIIGIIIai	ueveline Selvice					
Subm	ission Identification Number (SID)					
Taxpay	er's name	Social secur	ity numb	er		
NAV	EEN KUMAR NAGULA	740-20-5422				
Spouse	's name	Spouse's social security number				
Part	, , ,	year you a	are aut	horizing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 4 1	0	000	
1 2	Adjusted gross income		1 2	8	000.	
3	Total tax		3			
4	Amount you want refunded to you		4		224.	
5	Amount you owe		5		224.	
Part		ceep a cor		our retui	rn)	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended					
to send for any Agent payme authori payme busine taxes in person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the correceive confidential information necessary to answer inquiries and resolve issues related to the patient of the With the transfer of the income tax return (original or amended) I as a first with the With the payment (settlement) and the with the With the With the transfer of the income tax return (original or amended) I as a first with the With the work of the payment (settlement) and the with th	ection of the faction of the faction of the faction to debit the the authorizates must be processing cayment. I full	ransmis and its deax prepare entry to attion. The received the electrical transfer acle and the received the	sion, (b) the lesignated aration soft of this according to the lesignated aration soft of the lesignated aration are lesignated as a lesignated are lesionated are lesionat	e reason Financial tware for unt. This cancel) a or than 2 yment of that the	
	nic Funds Withdrawal Consent.	Г	Τ_Τ.			
 X		mv PIN	5 4	2 2	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	´ Eı		digits, but r all zeros	ao,	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n	ow outhoriz	ina Ch	ook thin h	ov onl v	
L	if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Your	signature ► Date ► _					
Spous	se's PIN: check one box only					
Г	I authorize to enter or generate	my PIN			as my	
_	ERO firm name	-	nter five o	digits, but	aomy	
	signature on the income tax return (original or amended) I am now authorizing.	do	on't ente	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spous	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	III Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 0	8 2 7	1	
		2011 (611	.s. un 20			
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtraction of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Providers of International Pub. 1345, Handbook for Authorized IRS e-file Pub. 1345, Handbook for Authorized IR	itting this ret	urn in a	ccordance		
ERO's	s signature ► Date ►					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	Oo 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 Jan. 1-Dec. 31, 2023, or other tax year beginning, 2023, ending					ending	,	20	See separate instructions.		
Your first name and middle initial			Last name					Your identifying number		
			(:					ructions)		
NAVEEN KU	MAR		NAGU	LA	740-20-5422					
Home address (numb	per and street). If you have a P.O. box	, see ins	tructions.			•	Apt. no.		
1000S WEL	СН	STREET						202		
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code		
BEAUMONT						TX		77705		
Foreign country	nam	e	Foreigr	n province/state/county		Foreign	postal cod	de		
Filing	×	Single	aratelv (N	MFS) Qualifvir	ng surviving spouse ((QSS)	☐ Est	ate 🗌 Trust		
Status		you checked the QSS box, enter the o		· · · · · · · · · · · · · · · · · · ·	0.	` '	endent:			
Check only		•		, , , , ,						
one box.										
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					or (b) sell, e			
Donondonto). (220 mandenene.)			if qualifies for (see inst.):		
Dependents (see instructions):	1			(2) Dependent's		i	ld tax credi	Cradit for other		
(occ men denome).		(1) First name Last name		identifying number	(3) Relationship to yo	ou Cili	u tax credi	dependents		
If more than four							Щ			
dependents, see										
instructions and								<u> </u>		
check here	<u> </u>									
Income	1a	Total amount from Form(s) W-2, box	`	,				8,000.		
Effectively	b	Household employee wages not rep Tip income not reported on line 1a (s		` '						
Connected	C C									
With U.S.	d	. 1d								
Trade or	e f									
Business	g	Employer-provided adoption benefit Wages from Form 8919, line 6					. 1g			
Attach	h	Other earned income (see instruction					. 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	i	Reserved for future use					. 1j			
RRB-1042-S,	k	Total income exempt by a treaty from			1 1					
and 8288-A here. Also		line 1(e)								
attach	z	Add lines 1a through 1h					. 1z	8,000.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a	1	b Tax	able interest		. 2b			
tax was	3a	Qualified dividends 3a	1	b Ord	linary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	1	b Tax	able amount		. 4b			
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount					
get a Form W-2, see	6	Reserved for future use								
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		8,000.						
,	10	Adjustments to income from Sched income	_							
	11	Subtract line 10 from line 9. This is y	our adj u	ısted gross income			. 11	8,000.		
	12	Itemized deductions (from Schedu								
		deduction (see instructions)				India Tre	aty 12	13,850.		
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts of								
	C	Add lines 13a and 13b						10.07		
	14						+	13,850.		
,	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta x	kable income .		. 15	0.		

Form 1040-NR (2	2023)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 2 8814 2	497	2 3	3 □		16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line 3					17	0.
	18	Add lines 16 and 17	18	0.				
	19	Child tax credit or credit for other dependents from Schedule 8812 (F	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	0.
	23a	Tax on income not effectively connected with a U.S. trade or business	from					
		Schedule NEC (Form 1040-NR), line 15		23a				
	b	Other taxes, including self-employment tax, from Schedule 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 total tax					24	0.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2		25a		224.		
	b	Form(s) 1099		25b				
	С	Other forms (see instructions)		25c				
	d	Add lines 25a through 25c		·			25d	224.
	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 2022 return.					26	
	27	Reserved for future use		27				
	28	Additional child tax credit from Schedule 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), line 15		31				
	32	Add lines 28, 29, and 31. These are your total other payments and r		ble cr	edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payme					33	224.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the					34	224.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attache	d, chec	k here		. 🗆	35a	224.
Direct deposit?	b				king 🗌			
See instructions.	d	Account number 4 8 8 1 0 3 5 0 8 0 6 3				•		
	е	If you want your refund check mailed to an address outside the United	ed State	es 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 instruc	ctions .				37	
	38	Estimated tax penalty (see instructions)		38				
Third	Do yo	u want to allow another person to discuss this return with the IRS? See	lete be	low. 🗵 No				
Party	Designee's Phone Personal identif							
Designee	name							
			of my knowledge and r has any knowledge.					
Sign	Your signature Date Your occ					If th	e IRS s	ent you an Identity
Here								PIN, enter it here
	SOFTWARE ENGINEER (see							
	Phone	e no. Email address						
Paid	Prepa	rer's name Preparer's signature		Date		PTIN		Check if:
	. SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/05/2024 P0208							Self-employed
Preparer	Firm's name CIODλI ΨλVEC IIC Phone n							78) 965-9522
Use Only	Firm's	saddress 245 ROONEY CT E BRUNSWICK NJ 08816	<u> </u>			Firm's E		4-3171965

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 NAVEEN KUMAR NAGULA 740-20-5422 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify)

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(4) 0 11.0.	(opcoy)			
			(a) 1070	(b) 1370	(6) 30 %	%	%			
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign o	corporations		1b					
С	Dividend equivalent p	aymer	its received with respect to section 871(m) transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	oration	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight 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	fits .			8					
9	Capital gain from line	e 18 be	elow		9					
10	Gambling—Resident If zero or less, enter	s of C	anada only. Enter net income in column	(c).						
а	Winnings									
b					10c					
11	Cambling Desident	o of o								
	Note: Enter winnings	s only.	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 busin						-NR, line 23a 15	
			Capital Gains a	nd Losses F	rom	Sales or Excha	inges of Proper	rty		
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).
	rely connected with a U.S. ss. Do not include a gain									
or loss on disposing of a U.S. real property interest; report these										
gains a	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17								
		18	Capital gain. Combine columns (f) an	d (g) of line 17	7. Ente	er the net gain here	e and on line 9 ab	ove. If a loss, ente	er -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 Internal Revenue Service Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name	shown on Form 1040-NR	Your identifying number									
NAV	EEN KUMAR NAGULA	740-20-5422									
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? India										
С		Have you ever applied to be a green card holder (lawful permanent resident) of the United States?									
D 1	Were you ever: A U.S. citizen?										
				⊠ No							
_	A green card holder (lawful permanent resident) of the United States?										
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.										
F	Have you ever changed your visa type (nonimmigrant sta	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	ng 2023. See inst	ructions.								
	Note: If you're a resident of Canada or Mexico AND co										
	check the box for Canada or Mexico and skip to item			☐ Mexico							
	Date entered United States Date departed United States mm/dd/yy mm/dd/yy	ites	Date entered United State mm/dd/yy		ted Unite m/dd/yy	d States					
	закуу					<u>'</u>					
Н	Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2021, and 2023365										
I	Did you file a U.S. income tax return for any prior year? If "Yes," give the latest year and form number you filed:				☐ Yes	⊠ No					
J	Are you filing a return for a trust?		☐ Yes	⊠ No							
	If "Yes," did the trust have a U.S. or foreign owner und										
K	U.S. person, or receive a contribution from a U.S. person Did you receive total compensation of \$250,000 or more				☐ Yes ☐ Yes	□ No ⊠ No					
ĸ		-				□ No					
L	If "Yes," did you use an alternative method to determine the source of this compensation?										
1											
	(a) Country	(b) Tax treaty a	rticle (c) Number of month								
	(e) Total Enter this amount on Form 1040-NR line 1k	Do not enter it an	wwhere else on line 1								
2	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
		Are you claiming treaty benefits pursuant to a Competent Authority determination?									
	If "Yes," attach a copy of the Competent Authority deter	-									
М	Check the applicable box if:										
	 This is the first year you are making an election to treat i with a U.S. trade or business under section 871(d). See 	instructions				🗌					
2	 You have made an election in a previous year that has States as effectively connected with a U.S. trade or busi 										