Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T-----

Taxpayer's name	Social security number
SREERAMANAND SAI PRASAD YADLA	874-38-5503
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you are authorizing.)
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 7,087.
2 Total tax	2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3
4 Amount you want refunded to you	4
5 Amount you owe	· · · · 5 0.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy of your return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abore return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for re- for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the I Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account im payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institut authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termina	ove are the amounts from the income tax mitter, or electronic return originator (ERO) ejection of the transmission, (b) the reason U.S. Treasury and its designated Financial dicated in the tax preparation software for tion to debit the entry to this account. This

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.

Тахрау	er's	PIN:	check	one	box	only

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

nerun

8	5	5	0	3	as my
			gits, all ze		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	Þ
------	-----------	---

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

04/10/2024

		as my
Enter		

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 🕨	Date ►
	hod Returns Only—continue below
Part III Certification and Authentication – Prac	titioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros

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 ►
	Retain This Form — See Instructions Form to the IRS Unless Requested To Do So
Free Designed and the Astronomy services and	DEV(00/07/01 DDO

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040)-	VR Department of the Treasury-Inter U.S. Nonresident Al	nal Revenue Service	, Tax Returr	2023	OMB No. 15	545-0074	IRS Use (or stap	Only-Do not write ble in this space.	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending,						,	20		ee separate Istructions.	
			Last name				1	our identifying number		
							(see in	structior	าร)	
SREERAMAN	IAN	D SAI PRASAD	YADLA				874	-38-5	503	
Home address (num	ber and street). If you have a P.O. box	, see instructions						Apt. no.	
City, town, or po	ost o	ffice. If you have a foreign address, al	so complete spac	es below.		State				
									13	
Foreign country	nan	le	Foreign province	e/state/county		Foreign	postal co	ode		
	Σ	Single 🛛 Married filing sepa	arately (MFS)	🗌 Qualifyin	ig surviving spouse	e (QSS)	E	state	Trust	
	lf	you checked the QSS box, enter the	child's name if the	e qualifying pers	on is a child but no	ot your dep	endent:			
one box.								-		
Digital Assets	At a	any time during 2023, did you: (a) rece	ve (as a reward, a	award, or payme	ent for property or	services); c	or (b) sell	exchan	ige, or	
.	oth	erwise dispose of a digital asset (or a	inancial interest in	n a digital asset)	? (See instructions	s.)			Yes 🔀 No	
Dependents						(4) Ch	eck the b	ox if qualif	fies for (see inst.):	
(see instructions):		(1) First name Last name			(3) Relationship to	vou Chi	ild tax cre			
		()		, ,	(,, , , , , , , , , , , , , , , , , , ,	,				
instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see instruction)	ns)			. 1a	1	7,087.	
Effectively	b	Household employee wages not rep	orted on Form(s)	W-2			. 11)		
Connected	С							-		
	d									
Business								_		
Attach										
Form(s) W-2,								•		
SSA-1042-S,							. 1	i		
RRB-1042-S,	k				1 1					
here. Also										
attach	z	Add lines 1a through 1h					. 12	2	7,087.	
.,	2a	Tax-exempt interest 2a	a	b Tax	able interest		. 2ł	>		
tax was	3a				-					
	4a									
W-2, see						thild but not your dependent: roperty or services); or (b) sell, exchange, or instructions.) (4) Check the box if qualifies for (see inst.): Child tax credit Credit for other dependents ationship to you (4) Check the box if qualifies for (see inst.): Child tax credit Credit for other dependents ationship to you (4) Check the box if qualifies for (see inst.): Credit for other dependents ationship to you (1) (1) (1) (2) (3) (4) Check the box if qualifies for (see inst.): Credit for other dependents (1) (1) (1) (1) (1) (1) (1) (1) (1) (2) (3) (4) Check there (2) (3) (3) (4) Check there (4) Check there (4) Check there (5) (5) (6) (6) (7) (7) (7) (8) (10) (11) (12) (13) (12) (13) (12) (13) (12) (13)				
instructions.										
	9								7,087.	
	10		-							
		-	· · ·	,.	,	-)		
	11	Subtract line 10 from line 9. This is y	our adjusted gro	oss income			. 11		7,087.	
	12									
						/India Tre	eaty 1 2	2	13,850.	
	b	•		,						
Your first name and middle initial Last name Your iterstings SREERAMANAND SAI PRASAD YADLA 874-38-55 Home address (number and street), if you have a P.O. box, see instructions. 1137 THOUSAND OARS 874-38-55 City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code RATTLETT Foreign postal code TIL 601.03 Filing Single Married filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single Married filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single Married filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single Married filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single filing separately (MFS) Qualitying surviving spouse (QSS) Estate Filing Single filing separately (MFS) Qualitying surviving spouse (QSS) Cf (D tock the box filing separately (MFS) Digital Asset(r) Gigital street Gigital street	12 050									
									<u>13,850.</u> 0.	
	10						. R	_	040 NB (0000)	

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

Form **1040-NR** (2023)

orm 1040-NR (2023)							Page 2
ax and	16	Tax (see instructions). Check if any	r from Form(s): 1 🗌 8	814 2 497	2 3		16	0.
Credits	17	Amount from Schedule 2 (Form 1)	040), line 3				17	0.
	18	Add lines 16 and 17					18	0.
	19	Child tax credit or credit for other	dependents from Sched	ule 8812 (Form 10,	40)		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, enter -0				22	0.
	23a	Tax on income not effectively con						
		Schedule NEC (Form 1040-NR), lin			23a			
	b	Other taxes, including self-employ						
		line 21			23b			
	с	Transportation tax (see instruction			23c			
	d	Add lines 23a through 23c	,				23d	
	24	Add lines 22 and 23d. This is your					24	0.
Payments	25	Federal income tax withheld from						
aymento	a	Form(s) W-2			25a			
	b	Form(s) 1099			25b		-	
	c	Other forms (see instructions)			255 25c			
	d	Add lines 25a through 25c					25d	
	u e	Form(s) 8805					25u	
	f	Form(s) 8288-A					25e	
							25g	
	g	Form(s) 1042-S						
	26 07	2023 estimated tax payments and	••				26	
	27	Reserved for future use			27		-	
	28	Additional child tax credit from So			28		-	
	29 00	Credit for amount paid with Form			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	
efund	34	If line 33 is more than line 24, sub			•		34	
	35a	Amount of line 34 you want refun					35a	
ect deposit? instructions.	b	Routing number X X X X		c Type:		Savings		
	d	Account number X X X X						
	е	If you want your refund check ma	ailed to an address outsid	de the United State	es not shown on	page 1,		
		enter it here.						
	36	Amount of line 34 you want applie	ed to your 2024 estimat	ted tax	36			
nount	37	Subtract line 33 from line 24. This	•					
ou Owe		For details on how to pay, go to w			· · · · ·	• •	37	0.
	38	Estimated tax penalty (see instruc	,		38			(1)
nird	Do yo	u want to allow another person to o	discuss this return with th	he IRS? See instruc	ctions. 🗌 Ye	es. Comp	olete be	low. 🛛 No
arty	Desig	nee's	Phone	•		nal identi	fication	
esignee	name					er (PIN)		
		penalties of perjury, I declare that I have they are true, correct, and complete. De						
ign								, ,
-	Yours	signature	Date	Your occupation				ent you an Identity
ere				STUDENT			e inst.)	PIN, enter it here
	Phone	200	Email address			(300	5 11 31.7	
			Preparer's signature		Date	PTIN		Check if:
aid	•						2702	Self-employed
reparer			SYAM PRIYA RAM	SAGAK GUPTA	04/10/2024	P0208		
opaioi	- irm s	name GLOBAL TAXES L	ЪС			Phone I	n u. (6	78)965-9522
se Only			r e brunswick n			Firm's E		4-3171965

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

Attachment Sequence No. 7B Your identifying number

2

SREERAMANAND SAI PRASAD YADLA

874-38-5503

Enter amount of income under the appropriate rate of tax. See instructions.

		Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
		Nature of Income			(a) 10%	(b) 15%	(C) 30%	%	%
1	Dividends and divide	end 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) tra	ansactions	1c					
2	Interest:								
а	Mortgage			2a					
b		orations	r i	2b					
с	Other			2c					
3	Industrial royalties (p	atents, trademarks, etc.)		3					
4		copyright royalties	t t	4					
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6		e and natural resources royalties	t t	6					
7	Pensions and annuiti	ies		7					
8		fits	t	8					
9	-	e 18 below	t t	9					
10	Gambling-Resident	ts of Canada only. Enter net income in column (c).							
а	Winnings								
b	Losses			10c					
11	Gambling-Resident Note: Enter winnings	ts of countries other than Canada. 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	rate of tax at top of each column		14					
15	Tax on income not e	ffectively connected with a U.S. trade or business						-NR, line 23a 15	
		Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty		
losses f exchan	nly the capital gains and from property sales or ges that are from sources he United States and not	16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyy		(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.								
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								
connec	ted with a U.S. business edule D (Form 1040),	17 Add columns (f) and (g) of line 16						N /	
	797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17.	. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 18	
For Pa	aperwork Reduction A	ct Notice, see the Instructions for Form 1040-NR.			BAA REV 0	3/07/24 PRO		Schedule NEC	(Form 1040-NR) 2023

SCHE	DULE	E OI
(Form	1040-	NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074 20**23**

partment of the Treasury	, Go t	o www.irs.gov/Form1040NR	for instructions and ver all questions.	the latest information.		Attachment	70			
ernal Revenue Service me shown on Form 104		AllSw	rer all questions.		our identifyi	Sequence N	0.70			
		ג דרו גע			-	•				
REERAMANAND			l during the text year		874-38-					
Of what count	Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States									
In what count	ry ulu you claim	green card holder (lawful pe	during the tax year?	the United States?						
-		green card noider (lawiul pe	ermanent resident) of	the United States? .						
Were you even							🛛 No			
1. A U.S. citizen										
•	· ·	rmanent resident) of the Uni				Yes	🗙 No			
-), see Pub. 519, chapter 4, f								
immigration st	atus on the last o	day of the tax year, enter ye day of the tax year. $\underline{F1}$			-	_				
		visa type (nonimmigrant state e the date and nature of the	us) or U.S. immigratio	on status?		∐ Yes	🗙 No			
-		left the United States during		ns.						
		anada or Mexico AND com			nt intervals					
		Mexico and skip to item H								
	United States	Date departed United State		te entered United States	Date de	parted Unite	d States			
mm	/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy				
Give number o	f days (including	vacation, nonworkdays, and	partial days) you were	present in the United St	ates during	:				
2021		, 2022	, and 20	23 365						
Did vou file a	J.S. income tax	return for any prior year? . nd form number you filed:				🗌 Yes	🔀 No			
Are you filing a	a return for a trus	st?				Yes	🗙 No			
		U.S. or foreign owner under								
		ribution from a U.S. person?					🗌 No			
Did you receiv	e total compens	ation of \$250,000 or more d	luring the tax vear?.			☐ Yes	× No			
-		ative method to determine th					No			
· · ·		you are claiming exemption								
		. See Pub. 901 for more info			,, ,					
	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 article	(c) Number of months	(d) /	Amount of exe	empt			
	(4) 000		(2) Fast in outly as note	claimed in prior tax year		e in current ta				
							-			
(a) Tatal Eat	or this amount o	n Form 1040-NR, line 1k. Do	not optor it opwyba	i re also on line 1						
						☐ Yes	No			
Z. VVELE VOU SUD	CULIU LAX III à IC	preign country on any of the	INCOME SHOWITH IN I(0) above?						

3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?	X
	If "Yes," attach a copy of the Competent Authority determination letter to your return.	
-		

Check the applicable box if: Μ

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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.