## 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

Subm	ission Identification Number (SID)				
Taxpaye	er's name	Social securit	y number		
SYA	M SAI KRISHNA KADUTHURI	149-31-	-8731		
Spouse		Spouse's soci	Spouse's social security number		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re autho	orizing.)	
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	33,	038.
2	Total tax		2	2,	081.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,	947.
4	Amount you want refunded to you		4	1,	866.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	y of you	ır returı	n)
return to send for any Agent to payme authori payme busines taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay 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 indicated in the financial institution active and for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution active attempts at the remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the transfer of the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the pal identification number (PIN) below is my signature for the income tax return (original or amended) I are income that the total consent.	tter, or electroction of the trans. Treasury are cated in the tanto debit the the authorizatests must be processing of ayment. I furt	nic returnansmission its des ix prepara entry to to tition. To it received the elect her acknown.	n originato on, <b>(b)</b> the ignated F ation softwhis accourevoke (call no later ronic pay owledge to	or (ERO) e reason inancial ware for int. This ancel) a than 2 ment of that the
Taxpa	yer's PIN: check one box only				
×		Ent	8 7 er five dig n't enter al	its, but	as my
Your s	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.  Signature ► Date ►				
Spous	se's PIN: check one box only				
	I authorize to enter or generate r  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	Ent dor	er five dig n't enter al	its, but I zeros	as my
	if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholelow.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
<b>Part</b>	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	<b>S EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ente	6 6 1 er all zeros	$\perp$	9
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in acc	ordanće v	
FR∩'e	s signature ► Date ►				
	ERO Must Retain This Form — See Instructions				

Don't Submit This Form to the IRS Unless Requested To 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 Ja	n. 1–D	ec. 31, 2023, or other tax year beginning	ng		2023,	ending	,	20		e separate structions.	
Your first name and middle initial									Your identifying number see instructions)		
SYAM SAI KRISHNA			KADU	THURI				149-	149-31-8731		
Home address (number and street). If you have a P.O. box,			see ins	tructions.				•		Apt. no.	
1038 POT	OMAC	RD									
City, town, or p	ost of	fice. If you have a foreign address, also	o comp	lete spaces belov	٧.		State	- 2	ZIP cod	de	
ATLANTA							GA		3033	8	
Foreign country	/ nam	е	Foreigr	n province/state/o	ounty		Foreign	ostal cod	le		
Filing Status		Single	• .	•		ng surviving spouse (		Esta	ate	☐ Trust	
Check only one box.	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depender										
Digital Assets		ny time during 2023, did you: (a) receiv rwise dispose of a digital asset (or a fir								ge, or <b>/es 🏿 No</b>	
Dependents	;						(4) Ch	eck the box	if qualifi	es for (see inst.):	
(see instructions)		(1) First name Last name		(2) Dependen identifying num		(3) Relationship to yo	Chil	d tax credit		edit for other dependents	
		(i) i i i c i i a i i a i i a i i a i i a i i a i i a		,		(c) Holdhorlorlip to yo	-				
If more than four								H		$\overline{\Box}$	
dependents, see instructions and	· —							П		<del>-</del> i	
check here								Ħ			
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)				. 1a		35,538.	
Effectively	b	Household employee wages not repo	•	,							
Connected	c	Tip income not reported on line 1a (se									
With U.S.	d	Medicaid waiver payments not report		,				. 1d			
Trade or	e	Taxable dependent care benefits from		.,		,		. 1e			
Business	f	Employer-provided adoption benefits		•				. 1f			
Business		g Wages from Form 8919, line 6									
Attach											
Form(s) W-2, 1042-S,	i	Reserved for future use	•								
SSA-1042-S,	i	Reserved for future use						. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from		,	)-NR), i						
here. Also attach		line 1(e)				<u>  1k  </u>				25 520	
Form(s)	z	Add lines 1a through 1h	i ·	· · · · i	 			. 1z		35,538.	
1099-R if	2a	Tax-exempt interest 2a	+			able interest		. 2b			
tax was withheld.	3a	Qualified dividends 3a	1			inary dividends		. 3b . 4b			
If you did not	4a	4a    IRA distributions    4a    b    Taxable amount       5a    Pensions and annuities    5a    b    Taxable amount									
get a Form	5а 6										
W-2, see	7										
instructions.	8	,	,	, ,		•					
	9			m 1040), line 10						35,538.	
		Adjustments to income from Schedu									
	10	income	,	,,		•				2,500.	
	11	Subtract line 10 from line 9. This is yo								33,038.	
	12	Itemized deductions (from Schedule								3370301	
	14	deduction (see instructions)								13,850.	
	13a	Qualified business income deduction				1 1		- 12		,,,,,,,,	
	b	Exemptions for estates and trusts onl									
	C	Add lines 13a and 13b	•	,				. 13c			
	14									13,850.	
	15	Subtract line 14 from line 11. If zero of								19,188.	

Form 1040-NR (2	2023)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): <b>1</b>	814 <b>2</b> 497	′2 <b>3</b> 🗌		16	2,081.
Credits	17	Amount from Schedule 2 (Form	1040), line	3				17	0.
	18	Add lines 16 and 17						18	2,081.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Form 10	40)		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 z	ero or less	s, enter -0				22	2,081.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a			
	b	Other taxes, including self-empl line 21	-		,	23b			
	С	Transportation tax (see instruction	ons)			23c			
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is yo	ur <b>total ta</b> :	<b>x</b>				24	2,081.
<b>Payments</b>	25	Federal income tax withheld from	m:						
-	а	Form(s) W-2				25a	3,947.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	3,947.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments ar	nd amount	applied from 20	022 return			26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S	Schedule 8	8812 (Form 1040	)	28			
	29	Credit for amount paid with Forn	n 1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form	,.			31			
	32	Add lines 28, 29, and 31. These	are your <b>t</b> o	otal other paym	ents and refunda	able credits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	otal payments .			33	3,947.
Refund	34	If line 33 is more than line 24, su				•		34	1,866.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here							1,866.
Direct deposit?	b	Routing number 1 0 2 0 0 1 0 1 7 c Type:  Checking Savings							
See instructions.	d	Account number 7 6 2 2 0 9 2 9 1							
	е	If you want your refund check menter it here.							
-	36	Amount of line 34 you want app				36			
Amount	37	Subtract line 33 from line 24. Th		-					
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions.			37	
	38	Estimated tax penalty (see instru	uctions) .			38			
Third	Do yo	ou want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions.	<b>/es.</b> Compl	ete bel	ow. 🗵 <b>No</b>
Party	_	signee's Phone Personal identi						cation	
Designee	name		oer (PIN)						
<b>C</b> :		penalties of perjury, I declare that I ha they are true, correct, and complete. [							
Sign	Your signature						<b>I</b>		ent you an Identity
Here					SOFTWARE				PIN, enter it here
ł	Dhon	2 no		Email address	BOFIWARE		(266	inst.)	
-	Phone	e no. urer's name	Preparer	Email address 's signature		Date	PTIN	1	Check if:
Paid				•	יייגעדעווע מעשו			اددور	Self-employed
Preparer							P02470		
Use Only									78)965-9522
0-1		aduless Z45 KUUNEY (	_1 E Bb	CUNSWICK N	υ υραπρ		Firm's El	<u> </u>	8-2145487

BAA

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Internal Revenue Service	Sequence No. <b>U1</b>					
Name(s) shown on Form 1040, 1040-SR, or 1040-NR  Your socia						
SYAM SAI KRISHNA KADUTHURI 149-31-						
Part I Addition	onal Income					

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h	_	
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	_	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	+	
S	Nontaxable amount of Medicaid waiver payments included on Form	0- (		
	1040, line 1a or 1d	8s (	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	01		
		8t	+	
u -	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter		9	
.0	1040, 1040-SR, or 1040-NR, line 8		10	
	10 10, 10 10 011, 01 10 10 1111, 11110 0	<u> </u>	10	

Schedule 1 (Form 1040) 2023 Page **2** 

Par	t II Adjustments to Income		
11	Educator expenses	. 11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	. 12	
13	Health savings account deduction. Attach Form 8889	. 13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	. 14	
15	Deductible part of self-employment tax. Attach Schedule SE	. 15	
16	Self-employed SEP, SIMPLE, and qualified plans	. 16	
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings	. 18	
19a	Alimony paid	. 19a	ı
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	. 20	
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
_	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans	_	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
	,		
ı	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect		
	tax law violations		
	Housing deduction from Form 2555		
ј k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
N.	1041)		
z	Other adjustments. List type and amount:		
_	0.4-		
25	Total other adjustments. Add lines 24a through 24z	. 25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10		2,500.
	, , , , , , , , , , , , , , , , , , , ,		

REV 02/05/24 PRO

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

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

SYAM SAI KRISHNA KADUTHURI 149-31-8731 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 Motion picture or TV copyright royalties . . . . . . . . . . . . . . . 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings \_\_\_\_\_ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) . . . . . . . . . . . . 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

## 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

Name shown on Form 1040-NR Your identif									
SYAM SAI KRISHNA KADUTHURI					149-31-8				
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? United States								
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?								
D	Were you ever:								
2.	A green card holder (lawful permanent resident) of the United States?								
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.								
E	immigration status on the last	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.							
F	Have you ever changed your value of the state of the stat	visa type (nonimmigrant sta	tus) or U.S. immig	ration status?		∐ Yes	⊠ No		
G	List all dates you entered and	left the United States durin	g 2023. See instru	uctions.					
	Note: If you're a resident of C								
	check the box for Canada or	· · · · · · · · · · · · · · · · · · ·			Mexico				
	Date entered United States	Date departed United State	es	Date entered United State		arted United	d States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy		nm/dd/yy			
			<del> </del>						
Н	Give number of days (including	vacation nonworkdays and	l I partial days) you	were present in the United :	States during:				
•	2021			•	_				
I	Did you file a U.S. income tax	return for any prior year? .				⊠ Yes	☐ No		
J	If "Yes," give the latest year and Are you filing a return for a tru					Yes	⊠ No		
•	If "Yes," did the trust have a					□ 163	Z 110		
	U.S. person, or receive a cont					Yes	□No		
Κ	Did you receive total compens	sation of \$250,000 or more	during the tax yea	ar?		Yes	⊠ No		
	If "Yes," did you use an altern					☐ Yes	☐ No		
L	Income Exempt From Tax—I complete (1) through (3) below				tax treaty with	a foreign	country,		
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the		
	(a) Cou		(b) Tax treaty art		ns (d) Am	ount of exe	empt		
	.,	•	,	claimed in prior tax ye	ars income i	n current ta	x year		
	(e) Total. Enter this amount of	on Form 1040-NR line 1k D	not enter it anv	where else on line 1					
2	Were you subject to tax in a fo					Yes	No		
	Are you claiming treaty benefi					_	⊠ No		
	If "Yes," attach a copy of the								
М	Check the applicable box if:	•	,						
1.	This is the first year you are muth a U.S. trade or business								
2.	You have made an election in States as effectively connected	n a previous year that has	not been revoke	d, to treat income from re	eal property lo	cated in th	e United		