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

	1.01.01.00		_			
Submis	ssion Identification Number (SID)					
Taxpayer	r's name	Social securi	ty numl	per		
SAI	SANTOSH REDDY KONTHAM	815-11-3814				
Spouse's	s name	Spouse's social security number				
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Vear voll a	re au	thorizina	1	
	whole dollars only on lines 1 through 5.	year you a	ii e au	unonzing	· <i>)</i>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		1	6	,807.	
	Total tax		2		0.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		301.	
	Amount you want refunded to you		4		301.	
	Amount you owe		5			
Part I		еер а сор	y of y	our retu	rn)	
my knoreturn (of to send for any Agent to payment authorize payment business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the particle funds Withdrawal Consent.	e are the am tter, or electro- action of the to S. Treasury a cated in the to the authorizatests must be processing of ayment. I fur	ounts for the counts of the co	rom the in turn original ssion, (b) the designated paration so to this accor or revoke of ved no late ectronic parknowledge	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the	
	yer's PIN: check one box only					
X	-	my DINI 1	3 8	3 1 4	as my	
Δ	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN metholelow.					
Your si	gnature ►					
Spous	e's PIN: check one box only					
	I authorize to enter or generate	mv PIN			as my	
	ERO firm name		ter five	digits, but	a.c,	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	II 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 ent	6 6	1 9 8	9	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submanents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Ir	itting this retu	urn in a	accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

E1040-NR 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, 20			20	See separate instructions.		
Your first name and middle initial			Last name Y					our identifying number see instructions)		
SAI SANTOSH REDDY				'HAM			815-	11-3814		
Home address (number and street). If you have a P.O. box, see instructions.						Apt. no.				
1212 HICK	ORY	MILLS CIRCLE								
City, town, or p	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State	2	ZIP code		
Kent							44240			
Foreign country name Foreign province/state/county Foreign posta						ostal cod	е			
Filing Status							☐ Esta	ate 🗌 Trust		
Check only one box.										
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f						xchange, or		
Dependents						(4) Che	ck the box	if qualifies for (see inst.):		
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Child	d tax credit	Credit for other dependents		
		(i) i i st riame		lacitarying nambor	(b) Helationship to yo	,u		dependents		
If more than four							\Box	+		
dependents, see instructions and							$\overline{\square}$			
check here										
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)			. 1a	6,807.		
Effectively	b	Household employee wages not rep	orted or	n Form(s) W-2			. 1b			
Connected	С	Tip income not reported on line 1a (see instr	uctions)			. 1c			
With U.S.	d	Medicaid waiver payments not repo	rted on F	orm(s) W-2 (see instruct	tions)		. 1d			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e			
Business	f	Employer-provided adoption benefit		•			. 1f			
Attach	g	Wages from Form 8919, line 6	. 1g							
Form(s) W-2,	h	Other earned income (see instruction	. 1h							
1042-S,	i	Reserved for future use								
SSA-1042-S, RRB-1042-S,	j	Reserved for future use	. <u>1j</u>							
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)								
attach	z	Add lines 1a through 1h					. 1z	6,807.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a			cable interest		. 2b			
tax was	3a	Qualified dividends 3a	a	b Ord	linary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	_		able amount					
If you did not get a Form	5a	Pensions and annuities 5a			able amount					
W-2, see	6	Reserved for future use	_							
instructions.	7	Capital gain or (loss). Attach Schedu								
	8 9	Additional income from Schedule 1 (Form 1040), line 10						6,807.		
	10	Adjustments to income from Sched		0,007.						
	10	income								
	11	Subtract line 10 from line 9. This is y		6,807.						
	12	Itemized deductions (from Schedu								
		deduction (see instructions)						13,850.		
	13a	Qualified business income deduction			1 1					
	b	Exemptions for estates and trusts or	nly (see i	instructions)	13b					
	С	Add lines 13a and 13b					. 13c			
	14							13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income .		. 15	0.		

Form 1040-NR (2	2023)									Page 2
Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): 1 88	314 2 [4972	3			16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line	3						17	0.
	18	Add lines 16 and 17								0.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)								
	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 les	s, enter -0						22	0.
	23a	Tax on income not effectively connected v Schedule NEC (Form 1040-NR), line 15	vith a U.S. trade o			3a				
	b	Other taxes, including self-employment to line 21		•		3b				
	С	Transportation tax (see instructions) .				3с				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is your total ta	ıx						24	0.
Payments	25	Federal income tax withheld from:								
,	а	Form(s) W-2			. 2	5a		301.		
	b	Form(s) 1099			. 2	5b				
	С	Other forms (see instructions)			. 2	5c				
	d	Add lines 25a through 25c							25d	301.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amoun	t applied from 20	22 return .					26	
	27	Reserved for future use			- 1	27				
	28	Additional child tax credit from Schedule				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				31				
	32	Add lines 28, 29, and 31. These are your t				e cred	lits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32.							33	301.
Refund	34	If line 33 is more than line 24, subtract line							34	301.
riciana	35a	Amount of line 34 you want refunded to y			-		-		35a	301.
Direct deposit?	b	Routing number 0 3 1 1 7 6		c Type:			_	Savings		33=1
See instructions.	d	Account number 3 6 2 4 9 6					j	ourgo		
	e	If you want your refund check mailed to a			i States	not sh	—: own on	nage 1		
	Ŭ	enter it here.								
	36	Amount of line 34 you want applied to yo				36				
Amount	37	Subtract line 33 from line 24. This is the a								
You Owe	•-	For details on how to pay, go to www.irs.	•		ions .				37	
rou owe	38	Estimated tax penalty (see instructions)			1	38				
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.							lete be	low. 🗵 No	
Party	•	Designee's Phone Personal ident								
Designee	name no. reisorial ide						ilcation			
		penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration								
Sign	Your	signature	Date	Your occup	oation			If th	e IRS s	ent you an Identity
Here							PIN, enter it here			
				FSW WO	RKER			(see	e inst.)	
	Phon	e no.	Email address							
Paid	Prepa	arer's name Prepare	r's signature		[ate		PTIN		Check if:
	VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI P0247					0833	Self-employed			
Preparer	Firm's name CIODAL TAVES LIC						10. (6	78)965-9522		
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK N.T 08816 Firm's E								8-2145487	

BAA

SCHEDULE NEC (Form 1040-NR)

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

Attachment

Your identifying number

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

OMB No. 1545-0074

SAI SANTOSH REDDY KONTHAM 815-11-3814 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 subtract (d) from (e). descriptive details not shown below) 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 sl	Name shown on Form 1040-NR Your identifying number									
SAI	SANTOSH REDDY KONTHA	815-11-3814								
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	[☐ Yes							
D	Were you ever:									
1.	A U.S. citizen?				[☐ Yes 🗵 No				
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 rul	les that apply to you.						
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. immigration status on the last day of the tax year.									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	eft the United States durin	g 2023. See instru	ctions.						
	Note: If you're a resident of C				uent intervals,					
	check the box for Canada or	Mexico and skip to item I	<u> </u>	🗌 Canada	☐ Mexico					
	Date entered United States	Date departed United Stat	es	Date entered United State		ed United States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mn	n/dd/yy				
			⊣ ⊢							
			⊣ ⊢							
	Cive purebox of dove (in aludina	veneties sessionalistes es		vana muaaant in tha I luitad	Ctataa duwinasi					
н	Give number of days (including				_					
1	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.			[⊠ Yes □ No				
J	Are you filing a return for a trus					☐ Yes X No				
Ū	If "Yes," did the trust have a U.S. person, or receive a contr	J.S. or foreign owner unde	r the grantor trust	rules, make a distribution	n or loan to a	□ Yes □ No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax year	?	[☐ Yes				
	If "Yes," did you use an alterna	ative method to determine	the source of this o	compensation?	[☐ Yes ☐ No				
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.									
1.	. 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 artic	cle (c) Number of month claimed in prior tax ye						
	(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it anvw	/here else on line 1						
2.	Were you subject to tax in a fo		-			☐ Yes ☐ No				
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.									
M	Check the applicable box if:									
1.	This is the first year you are may with a U.S. trade or business u									
2.	You have made an election in States as effectively connected									
		and the Instructions for Fa								