## 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

Secial security number   771-45-4607   Spouse's name   Secial security number   771-45-4607   Spouse's name   Spouse's name   Spouse's name   Spouse's social security number   Spouse's name   Spouse's na	Submission Identification N	umber (SID)			·			
Part   Tax Return Information — Tax Year Ending December 31, 2023 (Enter 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.   Adjusted gross income   1   22,605.   Total tax   2   2,495.   Total tax   2   2,495.   Total tax   2   2,495.   Federal income tax withheld from Form(s) W-2 and Form(s) 1099   3   3,312.   Amount you want refunded to you   4   817.   Amount you own trefunded to you   4   817.   Amount you own trefunded to you   4   817.   Amount you own for permy, I december that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best only knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. Clean to the less of any return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection return originator (ERC to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection return originator (ERC to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection return originator (ERC to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection features may not any return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection features where the U.S. Treasury of the propersion of the return originator and the IRS (a) and the IRS and the IRS and to receive the U.S. Treasury to the section of the processing of the IRS (a) and acknowledgement of receipt or reason for rejection requests must be received no other the return to the IRS (a) and the IRS (a	Taxpayer's name	Social securit	Social security number					
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 1 22, 60.5.  2 Total tax 2 2 2, 49.5. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 3, 3,31.2. 4 Amount you want refunded to you 4 8.17. 5 Amount you owe 5 Amount you owe 5 Amount you owe 6 Amount you owe 7 Total tax 8 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of periury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send my return to the IRS and to receive from the IRS (a) an activated declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send my return to the IRS and to receive from the IRS (a) an activated declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send my return to the IRS and to receive from the IRS (a) an activated declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing and the tendent of the send or any education of the tendent of the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) anyment, I must contact the U.S. Treasury Financial Agent at 1 *898-358-368-37 *9 member cancellation requests must be encoved to the thin authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorized activation or t	RASHMI REDDY KOMM	771-45-4607						
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	Spouse's name			Spouse's social security number				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income	Part I Tax Return Ir	nformation — Tax Year Ending Dece	mber 31, 2023 (Enter	year you a	re autl	horizing.	)	
Adjusted gross income  2 Total tax 2 2,495. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 3,3,312. 4 Amount you want refunded to you 4 817. 5 Amount you want refunded to you 5 Feat III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjun; I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best or return (original or amended) I am now authorizing, and to the best or return (original or amended) I am now authorizing, consent to allow my intermediate service provider, transmitter, or electronic return originator (ENC for any delay in processing the return or refund, and (a) the date of any refund, if applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debt) entry to the financial institution account indicated in the tax preparation software fo payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) is payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) is payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) is payment, I further acknowledge that the personal identification number (Pil) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, in Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only      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 II below.    Practitioner		<del>_</del>	,				,	
Total tax  Tederal income tax withheld from Form(s) W-2 and Form(s) 1099  Rederal income tax withheld from Form(s) W-2 and Form(s) 1099  Amount you want refunded to you  Amount you owe  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 amended) I am now authorizing, and to the best on my knowledge and belief, it is true, correct, and complete. If urther declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best on my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial and Cell electronic funds withdrawal (direct deficil entry to the financial institution account indication in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the text preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes on the income tax return (and the financial institution in two fermion taxes to received no later than a submission of the federation of the financial institution	Note: Form 1040-SS filers u	use line 4 only. Leave lines 1, 2, 3, and 5 bl	ank.					
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Part II		. ,			<u> </u>	3		
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Taxpayer's PIN: check one box only	for any delay in processing the Agent to initiate an ACH electropayment of my federal taxes or authorization is to remain in full payment, I must contact the business days prior to the pays taxes to receive confidential in personal identification number	e return or refund, and (c) the date of any refund onic funds withdrawal (direct debit) entry to the wed on this return and/or a payment of estimate ull force and effect until I notify the U.S. Treasu U.S. Treasury Financial Agent at 1-888-353-44 ment (settlement) date. I also authorize the information necessary to answer inquiries and (PIN) below is my signature for the income tax	I. If applicable, I authorize the Ú. financial institution account indied tax, and the financial institutioury Financial Agent to terminate 537. Payment cancellation requincial institutions involved in the resolve issues related to the p	S. Treasury as cated in the ta in to debit the the authoriza- lests must be processing of ayment. I furt	nd its d ax prepa entry to ation. To receiv the ele her ack	esignated aration soft of this according to the according	Financial ftware for bunt. This cancel) a er than 2 syment of that the	
authorize   GLOBAL TAXES LLC   to enter or generate my PIN   Enter five digits, but don't enter all zeros								
ERO firm name   Signature on the income tax return (original or amended)   am now authorizing.		-	to optor or goporato	5 DIN	4 6	0 7	00 m)/	
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 II below.    Your signature   Date		ERO firm name		Ent			as my	
Spouse's PIN: check one box only  □ I authorize	I will enter my PIN if you are entering	as my signature on the income tax return	(original or amended) I am n					
I authorize	Your signature ►		Date ▶ _					
I authorize	Snouse's PIN: check one I	hox only						
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 II below.  Spouse's signature ▶  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.    Date ▶	· _	sox only	to enter or generate i	mv PIN			as my	
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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 ▶  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.  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	<u> </u>	,	<u> </u>					
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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.  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	Spouse's signature ▶		Date <b>▶</b>					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  2 2 2 4 9 6 6 1 9 8 9  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 nov 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			-					
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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				Don't ente	er all zer	ros		
	authorized to file for tax year i	indicated above for the taxpayer(s) indicated a	bove. I confirm that I am subm	itting this retu	rn in a	ccordance		
ERO's signature ▶ Date ▶	ERO's signature ▶		Date ►					
ERO Must Retain This Form — See Instructions  Don't Submit This Form to the IRS Unless Requested To Do So				\- C-				

# 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–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20		See separate instructions.
Your first name						our identifying number			
	`				(see in	see instructions)			
					771	-45	-4607		
		per and street). If you have a P.O. box	, see ins	tructions.					Apt. no.
11277 NW5						a			<u>.</u>
• • •	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.		State			code
MIAMI				n province/state/county		FL			178
Foreign country	папп	=	Foreign	i province/state/county		Foreign	postai co	ode	
Filing Status		Single Married filing sepa	• .	•	ng surviving spouse	, ,		state	☐ Trust
Check only	lf y	ou checked the QSS box, enter the o	child's na	ame if the qualifying pers	son is a child but not	your dep	endent:		
one box.									
Digital Assets	At a	ny time during 2023, did you: (a) rece	ve (as a	reward, award, or payme	ent for property or se	ervices); o	r (b) sell	exch	nange, or
		rwise dispose of a digital asset (or a t							Yes 🛛 No
Dependents				(0) 5		(4) Ch	eck the bo	x if qu	ualifies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	ou Chi	ld tax cre	dit	Credit for other dependents
				, ,	(1)				
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	1	22,905.
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2			. 1k	<u> </u>	
Connected							. 10	;	
With U.S.	d	Medicaid waiver payments not repo		.,	,			<u> </u>	
Trade or	е	Taxable dependent care benefits fro		·				_	
Business	f	Employer-provided adoption benefit		·			. 11		
Attach	g								
Form(s) W-2,	h i	Reserved for future use					. 1h	1	
1042-S, SSA-1042-S,	;	Reserved for future use					. 1		
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1				
and 8288-A here. Also	K	line 1(e)							
attach	z	Add lines 1a through 1h					. 12		22,905.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	<b>b</b> Tax	able interest		. 2k	,	
tax was	За	Qualified dividends 3a	3	<b>b</b> Ord	linary dividends .		. 3Ł	,	
withheld.	4a	IRA distributions 4a	_		able amount				
If you did not	5a	Pensions and annuities 5a			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							22 005
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and							22,905.
•	10	Adjustments to income from Sched income	•	•	•				300.
income								22,605.	
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard								
	deduction (see instructions)							<u>.</u>	0.
	13a	Qualified business income deductio							
	b	Exemptions for estates and trusts of							
	С	Add lines 13a and 13b					. 13	С	
•	14	Add lines 12 and 13c					. 14	1	0.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b> x	xable income .	<u></u>	. 15	5	22,605.

Form 1040-NR (	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	y from For	rm(s): <b>1</b> 88	314 <b>2</b> [	497	2 <b>3</b>			16	2,495.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	2,495.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Fc	orm 104	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	2,495.
	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					٠			23d	
	24	Add lines 22 and 23d. This is yo	ur <b>total ta</b> :	<b>x</b>						24	2,495.
Payments	25	Federal income tax withheld from									
,	а	Form(s) W-2					25a		3,312.		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions)					25c				
	d	Add lines 25a through 25c								25d	3,312.
	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	)22 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from S	Schedule 8	812 (Form 1040	)		28				
	29	Credit for amount paid with Form	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 re	efunda	ble cre	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	tal paymer	nts .				33	3,312.
Refund	34	If line 33 is more than line 24, su					-	-		34	817.
	35a								35a	817.	
Direct deposit?	b	Routing number 1 1 1 0 0 0 0 2 5 c Type: $\square$ Checking $\boxtimes$ Savings									
See instructions.	d	Account number 4 8 8 1 0 6 4 4 6 4 0 7									
	е	If you want your refund check n	nailed to ar	n address outsic	de the Unite	d State	es not s	shown on	page 1,		
		enter 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	_	-		tions .	 			37	
	38	Estimated tax penalty (see instru									
Third	•	ou want to allow another person to	discuss t			instruc	ctions.		es. Comp		low. 🗵 No
Party Designee		ignee's Phone Personal identif							fication		
Designee		ame no number (PIN)  nder penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my kn								of my knowledge and	
_	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which										
Sign	Your	signature	Date Your occupation				If th	e IRS s	ent you an Identity		
Here							<b>I</b>		PIN, enter it here		
			FINANCE DATA ANALYST			' (see	e inst.)				
	Phone		Duan	Email address			Date		DTIN		
Paid		rer's name		's signature			Date		PTIN	000-	Check if:
Preparer		ATA SAI PAVAN KUMAR DUDIPALLI	l .	SAI PAVAN KU	JMAR DUDIE	PALLI			P0247		Self-employed
Use Only		s name GLOBAL TAXES							Phone r		78)965-9522
	Firm's	s address 245 ROONEY (	T E BR	RUNSWICK N	J 08816				Firm's E	IN 8	88-2145487

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

RASHMI REDDY

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

KOMMIDI

Attach to Form 1040, 1040-SR, or 1040-NR.

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

ion.		Sequence No. <b>01</b>
	Your soc	ial security number
	771-45	-4607

Par	t I 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. Att	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		
C	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		
I	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 1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
-	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
	,, <u> </u>	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		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	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	300.
22	Reserved for future use	22	
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 24g	-	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
- 1	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		
r	1041)		
z	Other adjustments. List type and amount:		
~	04_		
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 on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	300.
	, , , , , , , , , , , , , , , , , , , ,		

#### **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

RASHMI REDDY KOMMIDI 771-45-4607 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 identifying number 771-45-4607 RASHMI REDDY KOMMIDI 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: ☐ Yes X No 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: G List all dates you entered and left the United States during 2023. See instructions. 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 departed United States **Date entered 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 \_\_\_. Did you file a U.S. income tax return for any prior year? . . . . . . . . . . . . . . X Yes ☐ No ı If "Yes," give the latest year and form number you filed: 1040NR 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 ⊠ No Κ Yes 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 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? 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