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

	. 10 / 01 / 10 0						
Subm	ission Identificatio	on Number (SID)					
Taxpaye	er's name			Social s	security numb	per	
UTH:	EJ VEMULA			027	-85-727	9	
Spouse	's name			Spouse	's social sec	urity number	r
Part	Tay Retur	rn Information — Tax Year Ending	December 31 2022	Enter year y	OII are all	thorizina	1
		on lines 1 through 5.	December 51, 2023	(Litter year y	ou are au	ti lonzing.	•)
		ers use line 4 only. Leave lines 1, 2, 3, ar	nd 5 blank.				
1		ncome			. 1	29	,060.
2	Total tax						,607.
3	Federal income t	ax withheld from Form(s) W-2 and Form(s	s) 1099		. 3	2	,644.
4	Amount you war	nt refunded to you			. 4		,037.
5	Amount you owe				. 5		
Part	II Taxpayer	Declaration and Signature Author	ization (Be sure you get	and keep a	copy of y	our retu	rn)
my know return of to send for any Agent of payme authori payme busines taxes to person	owledge and belief, (original or amended my return to the If delay in processing to initiate an ACH e not of my federal tax zation is to remain nt, I must contact ss days prior to the to receive confiden al identification nun	I declare that I have examined a copy of the it is true, correct, and complete. I further dd) I am now authorizing. I consent to allow my RS and to receive from the IRS (a) an acknow g the return or refund, and (c) the date of any lectronic funds withdrawal (direct debit) entry es owed on this return and/or a payment of e in full force and effect until I notify the U.S. the U.S. Treasury Financial Agent at 1-888 payment (settlement) date. I also authorize t tial information necessary to answer inquirienter (PIN) below is my signature for the incorrect.	eclare that the amounts in Pari y intermediate service provider, yledgement of receipt or reason refund. If applicable, I authoriz to the financial institution acco stimated tax, and the financial i Treasury Financial Agent to te -353-4537. Payment cancellati the financial institutions involved as and resolve issues related t	t I above are the transmitter, or efor rejection of the U.S. Treas untindicated in institution to deby minimum the auton requests mutin the process of the payment.	e amounts felectronic retthe transmissury and its of the tax prephorization. Its before the receiping of the ell further ac	from the inc turn original ssion, (b) the designated paration soft to this accor- fo revoke (ved no late ectronic par- cknowledge	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of e that the
	nic Funds Withdraw ayer's PIN: check						
X		LOBAL TAXES LLC	to enter or ger	nerate my PIN	5 7 2	2 7 9	as my
	_	ERO firm name ne income tax return (original or amended		iciate my r mv		digits, but er all zeros	as my
	I will enter my	PIN as my signature on the income tax ring your own PIN and your return is file	return (original or amended)				
Yours	signature ►	Uthej Vemula	Da	te ►4/14	/2024		
Spous	se's PIN: check o	one box only					
	☐ I authorize	,	to enter or ger	nerate my PIN			as my
		ERO firm name		iorato iriy i iri	Enter five	digits, but	ao my
	signature on th	ne income tax return (original or amended	d) I am now authorizing.		don't ente	er all zeros	
		PIN as my signature on the income tax ring your own PIN and your return is file					
Spous	se's signature ▶		Da	te ▶			
			Returns Only—continue	below			
Part	III Certificat	ion and Authentication — Practition	oner PIN Method Only				
ERO's	s EFIN/PIN. Enter	your six-digit EFIN followed by your five	e-digit self-selected PIN.	2 2 2 4 Dor	9 6 6 o't enter all ze	1 9 8 eros	9
authori	zed to file for tax y	meric entry is my PIN, which is my signature year indicated above for the taxpayer(s) indictioner PIN method and Pub. 1345 , Handbook	cated above. I confirm that I ar	n submitting thi	s return in a	accordance	
ERO's	s signature ►			te ►			
			s Form — See Instruction				
		Don't Submit This Form to th	ne IRS Unless Requeste	d 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 Jar	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, 2	0	See separate instructions.
Your first name and middle initial		Last name			Your iden	tifying number		
					(see instru	ctions)		
UTHEJ			VEMU	LA			027-8	5-7279
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
626 GANNO	N H	EIGHTS LN						
City, town, or p	ost o	fice. If you have a foreign address, als	so comp	lete spaces below.		State	ZI	P code
FRISCO						TX	7	5033
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign po	ostal code	
Filing		Single Married filing sepa	arately (N	MES) Dualifyii	ng surviving spouse (0	1221	☐ Estate	e 🔲 Trust
Status		you checked the QSS box, enter the			0	,		c mast
Check only	"	you oncolled the QOO Box, office the C	ornia o ric	arrie ii trie quamying per	sorrio a orma bacriot y	our acper	ident.	
one box.								
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a f						
	+	i wise dispose of a digital asset (of a l	manciai	Interest in a digital asser	(See instructions.)			
Dependents				(2) Dependent's		1		qualifies for (see inst.): Credit for other
(see instructions)		(1) First name Last name		identifying number	(3) Relationship to you	J Child	tax credit	dependents
If more than four dependents, see	1							
instructions and								
check here								
Income	1a	Total amount from Form(s) W-2, box	< 1 (see i	nstructions)			1a	31,560.
Effectively	b	Household employee wages not rep	orted on	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		` '	,		1d	
Trade or	е	Taxable dependent care benefits fro		•			1e	
Business	f	Employer-provided adoption benefit	s from F	form 8839, line 29 .			1f	
Attach	g	Wages from Form 8919, line 6					1g	
Form(s) W-2,	h	Other earned income (see instructio	,				1h	
1042-S,	i	Reserved for future use			<u>1i</u>			
SSA-1042-S, RRB-1042-S,	J	Reserved for future use					1j	
and 8288-A	k	Total income exempt by a treaty from		,				
here. Also attach		line 1(e)			1k			21 560
Form(s)	Z	Add lines 1a through 1h	- 1	1			1z	31,560.
1099-R if	2a 3a	Tax-exempt interest 2a Qualified dividends 3a	_		kable interest		2b 3b	
tax was withheld.	sa 4a	IRA distributions 4			dinary dividends		3b 4b	
If you did not	ч а 5а	Pensions and annuities 5a			cable amount		5b	
get a Form	5a 6	Reserved for future use					6	
W-2, see	7	Capital gain or (loss). Attach Schedu					_	
instructions.	8	Additional income from Schedule 1						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and					9	31,560.
	10	Adjustments to income from Sched						,
		income		•	•		10	2,500.
	11	Subtract line 10 from line 9. This is y					11	29,060.
	12	Itemized deductions (from Schedu					d T	
		deduction (see instructions)		13,850.				
	13a	Qualified business income deductio						
	b	Exemptions for estates and trusts of	nly (see i	instructions)	13b			
	С	Add lines 13a and 13b					13c	
	14	Add lines 12 and 13c					14	13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income	<u> </u>	15	15,210.

Form 1040-NR (2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1	8814 2 497	2 3 🗌	16	1,607.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			17	0.
	18	Add lines 16 and 17			18	1,607.
	19	Child tax credit or credit for other dependents from Sch	nedule 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 zero or less, enter -0-			22	1,607.
	23a	Tax on income not effectively connected with a U.S. tra Schedule NEC (Form 1040-NR), line 15		23a		
	b	Other taxes, including self-employment tax, from Scheline 21	, ,,	23b		
	С	Transportation tax (see instructions)		23c		
	d	Add lines 23a through 23c			230	t l
-	24	Add lines 22 and 23d. This is your total tax			24	1,607.
Payments	25	Federal income tax withheld from:				
	а	Form(s) W-2		25a 2	2,644.	
	b	Form(s) 1099		25b		
	С	Other forms (see instructions)		25c		
	d	Add lines 25a through 25c			250	2,644.
	е	Form(s) 8805				
	f	Form(s) 8288-A				+
	g	Form(s) 1042-S				
	26	2023 estimated tax payments and amount applied from			26	
	27	Reserved for future use		27		
	28	Additional child tax credit from Schedule 8812 (Form 1)	•	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 pa				
Defend	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are you				
Refund	34 35a	If line 33 is more than line 24, subtract line 24 from line Amount of line 34 you want refunded to you . If Form 8		•		
Direct deposit?	ooa b	Routing number 1 1 1 0 0 0 0 2 5	c Type:		Savings	1,037.
See instructions.	d	Account number 4 8 8 1 1 8 3 3 7		Checking Z	Savings	
	e	If you want your refund check mailed to an address ou		os not shown on	page 1	
	e				. •	
	36	enter it here. Amount of line 34 you want applied to your 2024 estir	 nated tax	36		
Amount	37	Subtract line 33 from line 24. This is the amount you o		1 00		
You Owe	•	For details on how to pay, go to www.irs.gov/Payments			37	
	38	Estimated tax penalty (see instructions)		38		
Third	Do yo	u want to allow another person to discuss this return wit		ctions.	es. Complete b	elow. X No
Party Designee	Desig	nee's Pho	one		nal identificatio	
	Under	penalties of perjury, I declare that I have examined this return an they are true, correct, and complete. Declaration of preparer (oth		lles and statements	s, and to the bes	
Sign		signature Date	Your occupation			sent you an Identity
Here	, oui	Julia Bullo	Todi occapation			n PIN, enter it here
			SOFTWARE E	NGINEER	(see inst.)	
	Phone		SS	1 -		
Paid	Prepa	rer's name Preparer's signature		Date	PTIN	Check if:
Preparer	VENKA	TA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN	KUMAR DUDIPALLI		P02470833	Self-employed
Use Only Firm's name GLOBAL TAXES LLC						678)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E					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

UTHEJ VEMULA

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

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

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

Sequence No. 01

Your social security number 027-85-7279

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		
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		
- 1	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			
	a nongovernmental section 457 plan	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	
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	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 adjustments to income . Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10		2,500.
	, , , , , , , , , , , , , , , , , , , ,		

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

UTHEJ VEMULA

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

027-85-7279

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 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 15 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

Capital Gains and Lossos From Salas or Evolundes of Property

Enter only the capital gains and losses from property sales or exchanges that are from sources 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. rea 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). Form 4797, or both.

		Capital Gains an	u Losses From	Sales of Excha	nges of Propert	Ly		
i es ot	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).
s.								
al								
,								
,	17 /	Add columns (f) and (g) of line 16 .				17	()	
	18 (Capital gain. Combine columns (f) and	(g) of line 17. Ente	r the net gain here	e and on line 9 abo	ove. If a loss, enter	r -0 18	

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Name shown on Form 1040-NR

Internal Revenue Service

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

Attachment Sequence No. 7C

Your identifying number

UTHEJ VEMULA 027-85-7279 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