(Rev. January 2021)

Department of the Treasury

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

- Internal n	leverlue dei vice									
Submis	ssion Identification Number (SID)									
Taxpayer	r's name		Social	security	y numb	er				
AMAR	751-47-1088									
Spouse's name					Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 202	23 (Ente	r vear v	OU ar	e aut	noriz	ina)			
	whole dollars only on lines 1 through 5.	23 (LITE	y car y	ou ai	C dut	10112	.ii ig.)			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.									
	Adjusted gross income			.	1		9,	813.		
	Total tax			1	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 I	Taxpayer Declaration and Signature Authorization (Be sure you	get and	keep a	copy	of y	our r	eturi	n)		
to send for any of Agent to payment authorize payment business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provice my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or readelay in processing the return or refund, and (c) the date of any refund. If applicable, I author initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution at of my federal taxes owed on this return and/or a payment of estimated tax, and the financiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the treatment of the payment (settlement) date. I also authorize the financial institutions invotoreceive confidential information necessary to answer inquiries and resolve issues related alidentification number (PIN) below is my signature for the income tax return (original or amonic Funds Withdrawal Consent.	son for rejorize the Uccount indicated institution terminated in the part of t	ection of .S. Treas icated in on to debe the autuests muprocess ayyment.	the tra sury ar the ta bit the choriza ust be ing of I furth	ansmised its downward its downw	sion, esignaration this revolution the contraction that is a section to the contraction that is a section to the co	(b) the ated F n softwaccoulong later ic payledge to the coulong l	reason inancial vare for int. This ancel) a than 2 ment of that the		
	yer's PIN: check one box only									
X	I authorize GLOBAL TAXES LLC to enter or	generate	my PIN	7	1 0		8	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	J • • • •	,		er five o		but	,		
	I will enter my PIN as my signature on the income tax return (original or amendatifyou are entering your own PIN and your return is filed using the Practitioner below.									
Your si	ignature ▶	Date ► _								
Snouse	e's PIN: check one box only									
	I authorize to enter or	nenerate	my PIN					as my		
Ш	ERO firm name	gonorato	y v	Ent	er five o	igits,		ao my		
	signature on the income tax return (original or amended) I am now authorizing.			don	't enter	all ze	ros			
	I will enter my PIN as my signature on the income tax return (original or amenda if you are entering your own PIN and your return is filed using the Practitioner below.									
Spouse	e's signature ►	Date ►								
	Practitioner PIN Method Returns Only—continu									
Part 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 6	5 6	1 9	8 8	9		
			Dor	i't ente	r all zei	os				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Programmer	I am subn	nitting thi	s retu	rn in a	ccord	anće v			
ERO's	signature ►	Date ►								
	ERO Must Retain This Form — See Instruc	ctions								
	Don't Submit This Form to the IRS Unless Reques		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 Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending				,	20		ee separate nstructions.			
Your first name and middle initial			Last name					Your identifying number (see instructions)		
A M A D A NIA DII			'				`	751-47-1088		
AMARANADH Home address (number and street). If you have a P.O. box,			CHIM				/51-	4/-1	Apt. no.	
3470 ANDR	`	, ,	, 300 1113	iructions.					308	
		fice. If you have a foreign address, als	o comp	lete enaces helow		State		ZIP cc		
• • •		nice. If you have a foreign address, als	so comp	iete spaces below.		CA		9458		
PLEASANTO Foreign country		Δ	Foreign	n province/state/county			oostal cod		30	
r oreigir courti y	eigh country hame Toleigh province/state/country Toleigh posts						003121 000			
Filing Status	☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent						☐ Est	ate	☐ Trust	
Check only one box.							endent:			
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					r (b) sell, e			
Dependents						(4) Ch	eck the box	if quali	ifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Child		t C	Credit for other	
		(1) First Harrie Last Harrie		identifying number	(3) Neiationship to yo	ou			dependents	
If more than four							\dashv			
dependents, see										
instructions and check here										
	1a	Total amount from Form(s) W-2, box	1 (coo i	netructions)			. la	_		
Income Effectively	b	Household employee wages not rep	•	,						
Connected	C	Tip income not reported on line 1a (s		, ,						
With U.S.	d	Medicaid waiver payments not report		*						
Trade or	e	Taxable dependent care benefits fro		, ,	·					
Business	f	Employer-provided adoption benefit		·			. 1f			
Dusiness	g	Wages from Form 8919, line 6	. 1g							
Attach	h	Other earned income (see instruction					. 1h			
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 here. Also	k	Total income exempt by a treaty from line 1(e)		,	·		,			
attach	z	Add lines 1a through 1h					. 1z	1		
Form(s)	2a	Tax-exempt interest 2a	ı	b Tax	able interest		. 2b			
1099-R if tax was	3a	Qualified dividends 3a		b Ord	linary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	1		able amount		. 4b			
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use					. 6			
instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If no	ot required, check he	ere [
	8	Additional income from Schedule 1 (Form 1040), line 10							9,813.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively c	onnected income		. 9		9,813.	
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income									
	11	Subtract line 10 from line 9. This is y	. 11	1	9,813.					
	12	Itemized deductions (from Schedu deduction (see instructions)							13,850.	
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995-	·A . 13a					
	b	Exemptions for estates and trusts or	nly (see i	nstructions)	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 x	xable income .		. 15		0.	

Credits 1	6 7	Tax (see instructions). Check if any from	Form(s): 1 8814 2 4972 3 16	0.
0.00.00	7			υ.
1	•	Amount from Schedule 2 (Form 1040)	ine 3	0.
•	8	Add lines 16 and 17		0.
1	9	Child tax credit or credit for other dep	ndents from Schedule 8812 (Form 1040)	
2	20	Amount from Schedule 3 (Form 1040)	ine 8	
2	21	Add lines 19 and 20		
2	22	Subtract line 21 from line 18. If zero of	ess, enter -0	0.
2	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line 19		
	b	Other taxes, including self-employme line 21	tax, from Schedule 2 (Form 1040),	
	С	Transportation tax (see instructions)		
	d			
2	24	Add lines 22 and 23d. This is your total	tax	0.
Payments 2	25	Federal income tax withheld from:		
	а	Form(s) W-2	25a	
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c		
	е	Form(s) 8805		
	f	Form(s) 8288-A		
	g	Form(s) 1042-S		
2	26	2023 estimated tax payments and am	unt applied from 2022 return	
2	27	Reserved for future use		
2	28	Additional child tax credit from Sched		
2	29	Credit for amount paid with Form 104		
3	30	Reserved for future use		
3	31	Amount from Schedule 3 (Form 1040)		
3	32	,	r total other payments and refundable credits 32	
3	33	•	2. These are your total payments	
Refund 3	34		ine 24 from line 33. This is the amount you overpaid 34	
	35a		you. If Form 8888 is attached, check here	
Direct deposit?	b	Routing number X X X X X		
See instructions.	d		<u> </u>	
	е		o an address outside the United States not shown on page 1,	
		enter it here.		
3	36	Amount of line 34 you want applied to	your 2024 estimated tax 36	
Amount 3	37	Subtract line 33 from line 24. This is the		_
You Owe		For details on how to pay, go to www.	s.gov/Payments or see instructions	0.
	38	Estimated tax penalty (see instruction		
Third D	ο γοι	u want to allow another person to disci	s this return with the IRS? See instructions. Yes. Complete below. No	_
Party D	esigr	nee's	Phone Personal identification	
U			no. number (PIN) ined this return and accompanying schedules and statements, and to the best of my knowledge a on of preparer (other than taxpayer) is based on all information of which preparer has any knowled	
Sian				•
Here	our s	ignature	Date Your occupation If the IRS sent you an Identify Protection PIN, enter it her (see inst.)	•
Ь	hone	no	Email address	
В			rer's signature Date PTIN Check if:	
Paid 1			ATA SAI PAVAN KUMAR DUDIPALLI P02470833 Self-emplo	oved
Preparer F				
Use Only —		0203112 1111120 220	Phone no. (678)965-952 BRIINSWICK NJ 08816 Firm's EIN 88-2145487	<u> </u>

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

AMAR	ANADH CHIMMIRI	1-47-1	088		
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. Atta	ich Scl	hedule 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			
į	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 8o			
0	Section 461(I) excess business loss adjustment	8p			
p	Taxable distributions from an ABLE account (see instructions)	8g			
q r	Scholarship and fellowship grants not reported on Form W-2	8r			
S	Nontaxable amount of Medicaid waiver payments included on Form	01			
3	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or				
٠	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
	Other income. List type and amount:				
_	Other Income from Form 1099-K 9,813.	8z	9,81	L3.	
9	Total other income. Add lines 8a through 8z			. 9	9,813.

10

9,813.

10

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-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	· <u> </u>			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
_	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
_	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f		_	
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)	24h			
i	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	04:			
		24i		-	
J	Housing deduction from Form 2555	24j		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	2414			
_	1041)	24k		_	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
20	Form 1040, 1040-SR, or 1040-NR, line 10			26	
					lle 1 (Form 1040) 2023
	BAA	KEV 04/0	J3/24 PRU	Joneau	

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

on Schedule D (Form 1040).

Form 4797, or both.

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

AMARANADH CHIMMIRI 751-47-1088 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

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

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			
AMARANADH CHIMMIRI						088			
Α	Of what country or countries were you a citizen or na								
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:								
	A U.S. citizen?			⊠ No ⊠ No					
2									
E	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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								
F	Have you ever changed your visa type (nonimmigran If you answered "Yes," indicate the date and nature	t status) of the ch	or U.S. immiç ange:	gration status?		∐ Yes	⊠ No		
G	List all dates you entered and left the United States of	during 20	023. See instri	uctions.					
	Note: If you're a resident of Canada or Mexico AND				_				
	check the box for Canada or Mexico and skip to it				☐ Mexico				
	Date entered United States Date departed United mm/dd/yy mm/dd/yy	States		Date entered United State mm/dd/yy		arted Unite nm/dd/yy	d States		
	Піп/аа/уу			ППП/СССТУУ	'	iiii/dd/yy			
			•						
			•						
Н	Give number of days (including vacation, nonworkdays			•	_				
ı	2021, 2022 Did you file a U.S. income tax return for any prior yea	ar?	, an		· · · · · · · · · · · · · · · · · · ·	⊠ Yes	□No		
-	If "Yes," give the latest year and form number you file								
J	Are you filing a return for a trust?					☐ Yes	⊠ No		
	If "Yes," did the trust have a U.S. or foreign owner								
1 /	U.S. person, or receive a contribution from a U.S. pe					∐ Yes	□ No ⊠ No		
K	Did you receive total compensation of \$250,000 or n If "Yes," did you use an alternative method to detern					☐ 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) Country	(b)) Tax treaty an	ticle (c) Number of month	, ,	Amount of exempt ie in current tax year			
	(e) Total. Enter this amount on Form 1040-NR, line	1k Dona	ot optor it and	whore also on line 1					
2	Were you subject to tax in a foreign country on any of		-			Yes	□No		
	 Are you claiming treaty benefits pursuant to a Comp 			` '			⊠ No		
J	If "Yes," attach a copy of the Competent Authority d		-						
М	Check the applicable box if:								
1	 This is the first year you are making an election to tre with a U.S. trade or business under section 871(d). 								
2	. You have made an election in a previous year that	has not	been revoke	d, to treat income from re	al property lo	cated in th	ne United		
	States as effectively connected with a U.S. trade or I	Jusiness	unaer section	1 8/1 (a). See Instructions .	<u> </u>	· · ·	· · 🖳		