| Form <b>8879</b>           |
|----------------------------|
| (Rev. January 2021)        |
| Depertment of the Treesury |

#### epartment of the Treasury Internal Revenue Service

# **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taypayar'a nama

| Taxpayer s hame  |              | Social Security I | umber           |
|--|--------------|-------------------|-----------------|
| VIVEKANANDA REDDY KOTA   |              | 035-59-7          | 432             |
| Spouse's name  |              | Spouse's social   | security number |
|  |              |                   |                 |
| Part I Tax Return Information — Tax Year Ending December 31,   | 2022 (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.   |              |                   |                 |
| 1 Adjusted gross income  |              |                   | 1 2,505.        |
| <b>2</b> Total tax   |              |                   | 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   |              | [                 | <b>5</b> 0.     |
| Part II Taxpayer Declaration and Signature Authorization (Be sure y  | ou get and k | keep a copy       | of your return) |
| Under penalties of perjury, I declare that I have examined a copy of the income tax return (original text and penalties and belief, it is true account and penalties of the text and penalties and belief. | ,            |                   | 0,              |

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. 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 acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) 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 debit) entry to the financial institution account indicated 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 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) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

### Taxpayer's PIN: check one box only

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

| 9   | 7 | 4 | 3 | 2 | as |  |  |  |  |  |
|---|---|---|---|---|----|--|--|--|--|--|
| Enter five digits, but<br>don't enter all zeros |   |   |   |   |    |  |  |  |  |  |

my

as mv

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 III below.

Your signature 🕨

Date 🕨

#### Spouse's PIN: check one box only

I authorize

| to | enter | or | generate | mv   | PIN    |
|----|-------|----|----------|------|--------|
| ιU | CITCI |    | generate | iiiy | 1 11 1 |

Enter five digits, but don't enter all zeros

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 III below.

| Spouse's s  | Spouse's signature 🕨 🛛 🛛 🖸  |   |   |   |  |      |              | <br>  |     |   |
|---|---|---|---|---|--|------|--------------|-------|-----|---|
| Practitioner PIN Method Returns Only—continue below |   |   |   |   |  |      |              |       |     |   |
| Part III  | Certification and Authentication – Practitioner PIN Method Only                 |   |   |   |  |      |              |       |     |   |
| ERO's EFII  | N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. | 2 | 2 | 2 |  | <br> | 0<br>all zei | <br>2 | 7 1 | 1 |

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 requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

| ERO's signature ► Date ►                                |  |                  |                          |  |  |  |  |  |
|---|--|------------------|--------------------------|--|--|--|--|--|
|   | Retain This Form — See<br>Form to the IRS Unless |                  |                          |  |  |  |  |  |
| For Paperwork Reduction Act Notice, see your tax return | rn instructions. BAA                             | REV 07/14/23 PRO | Form 8879 (Rev. 01-2021) |  |  |  |  |  |

| E1040                                      | )-       | NR Department of the Treasury-Inte<br>U.S. Nonresident Al                           | rnal Rever<br><b>ien In</b> | nue Service<br>Come Tax R | eturn    | 2022                             | OMB No.       | 1545-007    |          | Use Only—Do not write<br>r staple in this space. |
|--|----------|---|-----------------------------|---------------------------|----------|----------------------------------|---------------|-------------|----------|--|
|  |          | Dec. 31, 2022, or other tax year begin  |                             |                           |          |                                  |               |             |          | See separate instructions.                       |
| Filing<br>Status<br>Check only<br>one box. |          | Single Darried filing sep f you checked the QSS box, enter the cl                   | hild's nan                  | ne if the qualifying      | person i |                                  | ( )           |             | Estat    | e 🗌 Trust  |
| Your first name                            | e and    | middle initial  | Last na                     | ame                       |          |                                  |               |             |          | tifying number                                   |
|  |          |   |                             |                           |          |                                  |               | )           |          | ctions)  |
| VIVEKANA                                   |          |   | KOTA                        |                           |          |                                  |               | 03          | 5-5      | 9-7432   |
|  |          | nber and street). If you have a P.O. bo   | x, see ins                  | structions.               |          |                                  |               |             |          | Apt. no.   |
| 1831 E A                                   | -        | HE BLVD<br>office. If you have a foreign address, a                                 |                             | lata anagan hala          |          |                                  | State         |             | 71       | B3050<br>P code                                  |
|  | JUSL     | onice. Il you nave a loreign address, a   |                             | nete spaces below         | v.       |                                  |               |             |          |  |
| TEMPE<br>Foreign countr                    | vnar     | ne  | Foreig                      | n province/state/c        |          |                                  | AZ            | n postal    |          | 5281   |
| i oreigii counti                           | ynai     |   | lineig                      | in province, state, e     | Jounty   |                                  | lineig        | n postar    | Jouc     |  |
| Digital Asset                              |          | any time during 2022, did you: (a) rece<br>nerwise dispose of a digital asset (or a |                             |                           |          |                                  |               |             |          |  |
| Dependents                                 | -        |   |                             |                           |          | (000                             |               |             |          | qualifies for (see inst.):                       |
| (see instructions                          |          |   |                             | (2) Dependen              |          |                                  |               | hild tax cr |          | Credit for other                                 |
| (  | /-<br>   | (1) First name Last name  |                             | identifying num           | iber     | (3) Relationship to              | you           |             | cuit     | dependents                                       |
| If more than fou                           | r ⊢      |   |                             |                           |          |                                  |               |             |          |  |
| dependents, se                             |          |   |                             |                           |          |                                  |               |             |          |  |
| instructions and check here                |          |   |                             |                           |          |                                  |               |             |          |  |
|  | 1a       | Total amount from Form(s) W-2, bo   | v 1 (soo i                  | instructions)             |          |                                  |               |             | la       | 2,505.   |
| Effectively                                | b        |   | •                           | ,                         |          |                                  |               |             | lb       | 2,303.   |
| Connected                                  | c        |   |                             |                           |          |                                  |               |             | lc       |  |
| With U.S.                                  | d        |   |                             |                           |          |                                  |               |             | ld       |  |
| Trade or                                   | e        |   |                             |                           |          |                                  |               |             | le       |  |
| Business                                   | f        | Employer-provided adoption benefi   |                             |                           |          |                                  |               |             | 1f       |  |
|  | g        |   |                             |                           |          |                                  |               |             | lg       |  |
| Attach<br>Form(s) W-2,                     | h        | Other earned income (see instruction  | ons) .                      |                           |          |                                  |               |             | h        |  |
| 1042-S,                                    | i        | Reserved for future use   |                             |                           |          | . 1i                             |               |             |          |  |
| SSA-1042-S,<br>RRB-1042-S,                 | j        | Reserved for future use   |                             |                           |          |                                  |               | · _         | 1j       |  |
| and 8288-A                                 | k        |   |                             |                           | ,        |                                  |               |             |          |  |
| here. Also                                 |          | line 1(e)   |                             |                           |          | . 1k                             |               |             |          |  |
| attach<br>Form(s)                          | z        | ũ   | 1                           | · · · · ·                 |          |                                  |               |             | lz       | 2,505.   |
| 1099-R if                                  | 2a       | ·   | a                           |                           |          | ble interest                     |               | -           | 2b       |  |
| tax was<br>withheld.                       | 3a       |   | a                           |                           |          | hary dividends .<br>ble amount . |               |             | 3b       |  |
| If you did not                             | 4a<br>5a |   | a<br>a                      |                           |          | ble amount                       |               | -           | ib<br>5b |  |
| get a Form                                 | 5a<br>6  | Reserved for future use   |                             |                           |          |                                  |               |             | 6        |  |
| W-2, see                                   | 7        | Capital gain or (loss). Attach Sched  |                             |                           |          |                                  |               |             | 7        |  |
| instructions.                              | 8        | Other income from Schedule 1 (For   |                             |                           |          |                                  |               |             | 8        |  |
|  | 9        | Add lines 1z, 2b, 3b, 4b, 5b, 7, and  | ,.                          |                           |          |                                  |               |             | 9        | 2,505.   |
|  | 10       | Adjustments to income:  |                             |                           | -        |                                  |               |             |          |  |
|  | а        | From Schedule 1 (Form 1040), line   | 26                          |                           |          | . 10a                            |               |             |          |  |
|  | b        | Reserved for future use   |                             |                           |          | . 10b                            |               |             |          |  |
|  | с        |   |                             |                           |          |                                  |               |             |          |  |
|  | d        |   |                             |                           |          |                                  |               |             | 0d       |  |
|  | 11       | Subtract line 10d from line 9. This is  |                             |                           |          |                                  |               |             | 11       | 2,505.   |
|  | 12       | Itemized deductions (from Sched   |                             |                           |          |                                  |               |             |          |  |
|  |          | deduction (see instructions) .  |                             |                           |          | 1 1                              | ln US/India.' | ireaty      | 12       | 12,950.  |
|  | 13a      |   |                             |                           |          |                                  |               |             |          |  |
|  | b        | 1   |                             | ,                         |          |                                  |               |             | 2        |  |
|  | C        |   |                             |                           |          |                                  |               |             | 3c       | 10 050   |
|  | 14<br>15 | Add lines 12 and 13c  |                             | $\cdots$                  |          |                                  |               |             | 14<br>15 | 12,950.  |
|  | 15       | Subtract line 14 from line 11. If zero  |                             |                           |          | ible income .                    |               | •           |          | 0.   |

Form **1040-NR** (2022)

| Tax and   16   Tax isse instructions). Check if any from Form[k: 1   1814   2   1472   3   16   0     Credits   17   Anount from Schedule 3 (From 1040), line 3.   17   0   18   0     18   Add lines 16 and 17.   18   0   19   0   19   0     20   Add lines 16 and 20     | Form 1040-NR (  | 2022) |   |          |                       |                    |             |             |            |         |       | Page <b>2</b> |
|--|-----------------|-------|---|----------|-----------------------|--------------------|-------------|-------------|------------|---------|-------|---------------|
| 19   Add lines 19 and 20   19     20   Arrown from Schedule 3 (Form 1040), line 8   20     21   Add lines 19 and 20   21     23   Subtract line 11 from line 18. It zero or less, enter -0   22   0.     23   Tax on income not effettively connected with a U.S. trade or business from Schedule 8(Form 1040-N), line 15   23   0.     24   Add lines 19 and 20   24   0.   24   0.     24   Subtract line (Form 1040-N), line 15   23a   24   0.     25   Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 2   25a   24     24   Add lines 23 and rough 230   25a   25a   25a     26   7   7   7   7   7     27   Payments   25   7   7   7   7     28   Fedoral income tax withheld from:   25a  | Tax and         | 16    | Tax (see instructions). Check if any fr | rom For  | rm(s): <b>1</b> 🗌 88  | 314 <b>2</b> 🗌 497 | '2 <b>3</b> |             |            | 16      |       | 0.            |
| 19   Add lines 19 and 20   19     20   Arrown from Schedule 3 (Form 1040), line 8   20     21   Add lines 19 and 20   21     23   Subtract line 11 from line 18. It zero or less, enter -0   22   0.     23   Tax on income not effettively connected with a U.S. trade or business from Schedule 8(Form 1040-N), line 15   23   0.     24   Add lines 19 and 20   24   0.   24   0.     24   Subtract line (Form 1040-N), line 15   23a   24   0.     25   Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 2   25a   24     24   Add lines 23 and rough 230   25a   25a   25a     26   7   7   7   7   7     27   Payments   25   7   7   7   7     28   Fedoral income tax withheld from:   25a  | Credits         | 17    | Amount from Schedule 2 (Form 104        | 0), line | 3                     |                    |             |             |            | 17      |       | 0.            |
| 19   Child tax credit for other dependents from Schedule 8812 (Form 1040)   19     21   Add lines 19 and 20   21     22   Subtract line 21 from ine 18, if zero or less, enter -0   22     23   Tax on income of effectively connected with a U.S. trade or business from Schedule AEC (Form 1040, line 15). Stade or business from Schedule AEC (Form 1040, line 15). Stade or business from Schedule AEC (Form 1040, line 15). Stade or business from Schedule AEC (Form 1040, line 15).   22a     24   Add lines 22a through 23c.   22a     25   Federal income tax withheid from:   22a     26   Chines 22a through 23c.   22a     26   Chines 22a through 23c.   22a     26   Chines 22a through 23c.   22a     27   Read 10, so 23a through 25c.   22a     28   Federal income tax withheid from:   25a     26   Chine 70, 8005.   25a     27   Read duines 26a, 25a, 25a   25a     28   Form(8) 1042.S   25a     29   Chine 700, 22a   25a     20   Chine 700, 22a   25a     21   Read duines 26a, 25a, 25b   25a     22   Chine 700, 7a   25a <tr< th=""><th></th><th>18</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th>18</th><th></th><th>0.</th></tr<>  |                 | 18    |   |          |                       |                    |             |             |            | 18      |       | 0.            |
| 21   Add lines 19 and 20   21   22   0_     22   Subtract line 21 from line 18, ff zero or less, enter -0   22   0_     23a   Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 13   23a   23a     24   0.   23b   23b   23a     24   0.   23b   23b   23b     25   Federal income tax (see instructions)   23c   23c   23d     4   Add lines 22a through 23c   22b   22b   22b     26   27b   Federal income tax withheld from:   22b   22b     27   Add lines 22a through 25c   22b   22c   22b     28   28   28   28   28   28     29   217   Reserved for future use   231   231   232     28   282   28   28   28   28   28     217   Reserved for future use   30   31   32   34   34   34     39   Reserved for future use   30   31   34   35   35  |                 | 19    |   |          |                       |                    |             |             |            | 19      |       |               |
| 22   Subtract line 21 from line 18. if zero or less, enter -0.   22   0.     23a   Tax on income not effectively connected with a U.S. trade or busines from Schedule NEC (Form 1040-NR), line 15   23a     b   Other taxes, including self-employment tax, from Schedule 2 (Form 1040, line 21   23a     24   Add lines 22 and 23a. This is your total tax   23a     24   Add lines 22 and 23a. This is your total tax   24     9   Federal lincome tax withheld from:   25a     a   Form(s) 1049   25a     c   Transportation tax (see instructions)   25a     c   Other forms (see instructions)   25a     c   Other forms (see instructions)   25a     c   Other forms (see instructions)   25a     c   Form(s) 1042-S   25a     2022 estimated tax payments and amount applied from 2021 return   27a     28   22a   23a     29   Credit for amount paid with Form 1040-C   23a     31   Amount from Schedule 3 (Form 1040), line 15   31a     32   Add lines 23, 20, and 31. These are your total payments   33a     34   H fine 33 is more than line 24, subtract line 24 from line   |                 | 20    | Amount from Schedule 3 (Form 104        | 0), line | 8                     |                    |             |             |            | 20      |       |               |
| 22   Subtract line 21 from line 18. if zero or less, enter -0.   22   0.     23a   Tax on income not effectively connected with a U.S. trade or busines from Schedule NEC (Form 1040-NR), line 15   23a     b   Other taxes, including self-employment tax, from Schedule 2 (Form 1040, line 21   23a     24   Add lines 22 and 23a. This is your total tax   23a     24   Add lines 22 and 23a. This is your total tax   24     9   Federal lincome tax withheld from:   25a     a   Form(s) 1049   25a     c   Transportation tax (see instructions)   25a     c   Other forms (see instructions)   25a     c   Other forms (see instructions)   25a     c   Other forms (see instructions)   25a     c   Form(s) 1042-S   25a     2022 estimated tax payments and amount applied from 2021 return   27a     28   22a   23a     29   Credit for amount paid with Form 1040-C   23a     31   Amount from Schedule 3 (Form 1040), line 15   31a     32   Add lines 23, 20, and 31. These are your total payments   33a     34   H fine 33 is more than line 24, subtract line 24 from line   |                 | 21    |   |          |                       |                    |             |             |            | 21      |       |               |
| 23a   Tax on income not effectively connected with a U.S. trade or business form<br>Schedule NEC (Form 1040-NR), line 15   23a     23b   23b   23b     24b   23b   23b     25b   23c   23b     25b   23c   23c     25b   23c   23c     25c   23c   23c     25b   25b   25b     25c   25b   25c     25c   25c   25c     25c <th></th> <th>22</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>22</th> <th></th> <th>0.</th>   |                 | 22    |   |          |                       |                    |             |             |            | 22      |       | 0.            |
| Schedule NEC (Form 1040-NR), line 15   23a     c   Transportation tax (see instructions)   23b     c   Transportation tax (see instructions)   23c     24   Add lines 22 and 23d. This is your total tax   24     25   See federal income tax withheid from:   25a     a   Form(s) 109 9   25a     b   Form(s) 109 9   25a     c   Other forms (see instructions)   25a     d   Add lines 25a through 25c   25b     d   Add lines 25a through 25c   25c     d   Form(s) 102-S   25a     26   Form(s) 102-S   25c     27   Reserved for future use   27     28   2022 estimated tax payments and amount applied from 2021 return   28     29   Credit for amount paid with Form 1040-C   29     29   Credit for future use   30     31   Amount form Schedule 8 (Form 1040), line 15   31     32   Add lines 25d, 25e, 24, and 31. These are your total payments   33     34   H line 325 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     34  |                 | 23a   |   |          |                       |                    |             |             |            |         |       |               |
| line 21     230     232       24     Add lines 23a through 23c     232       24     Add lines 23a through 23c     232       24     Add lines 23a through 23c     233       25     Federal nome tax withheid from:     253       26     Comp(s) W-2     255       27     Description     256       28     Comp(s) W-2     256       29     Other forms (see instructions)     256       26     Comp(s) W-2     256       27     Reserved for future use     259       28     202 estimated tax payments and amount applied from 2021 return     26       27     Reserved for future use     27       28     230     230       29     Credit for amount paid with Form 1040-C     23       30     Add lines 28, 29, and 31. These are your total other payments and refundable credits     32       34     fl line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid     34       35a     Add lines 23, cong 28, 28, and 32. These are your total payments     33       34     fl line 33 uo want refu   |                 | 200   | 2                                       |          |                       |                    | 23a         |             |            |         |       |               |
| c   Transportation tax (see instructions)   23c   23d     24   Add lines 22 and 23d. This is your total tax   24   0.     Payments   25   Federal income tax withheld from:   25a   25a     a   Form(s) V2   25a   25a     b   Form(s) V2   25a   25a     d   Add lines 23a through 25c   25a   25a     d   Form(s) 828A   25a   25a     26   277   Reserved for future use   25a     27   Reserved for future use   27   28a     28   Add lines 24, 29, and 31. These are your total other payments and refundable credits   32     31   Add lines 25a, 28, 26, 28, 25a, 26, and 32. These are your total payments   33     33   Add lines 25a, 28, 26a, 28, 25a, 26a, and 32. These are your total payments   33     34   H line 33 is more than line 24, uburcat line 24 from line 33. This is the amount you overepid   34     34  |                 | b     | Other taxes, including self-employn     | nent ta  | x, from Schedul       | e 2 (Form 1040),   |             |             |            |         |       |               |
| d     Add lines 23a through 23c     23d       24     Add lines 22a and 23d. This is your total tax     24     0.       Payments     25     Federal income tax withheld from:     25a     24     0.       25     Federal income tax withheld from:     25a     25b     25c     25c <t< th=""><th></th><th></th><th>line 21</th><th></th><th></th><th></th><th>23b</th><th></th><th></th><th></th><th></th><th></th></t<>  |                 |       | line 21                                 |          |                       |                    | 23b         |             |            |         |       |               |
| 24     Add lines 22 and 23d. This is your total tax     24     0.       Payments     25     Federal income tax withheld from:     25a       a     Form(\$) 1099     25b     25b       d     Add lines 25a through 25c     25a       d     Add lines 25a through 25c     25c       d     Add lines 25a     25c       d     Add lines 25a through 25c     25c       d     Add lines 25a     25d       26     25g     25g       27     Reserved for future use     27       28     Additional child tax credit from Schedule 812 (Form 1040)     28       31     Amount form Schedule 3 (Form 1040, line 15     31       32     33     34       44     It line 33 is more than line 24, subtract line 124 form line 33. This is the amount you verpaid     34       35a     Amount of line 34 you want refunded   |                 | с     | Transportation tax (see instructions)   | )        |                       |                    | 23c         |             |            |         |       |               |
| Payments     25     Federal income tax withheld from:     25       a     Form(s) W-2     25b       b     Form(s) (1099     25b       c     Other forms (see instructions)     25c       d     Add lines 25a through 25c     25c       e     Form(s) 8288-A     25c       g     Form(s) 1042-S     25c       26     22c2     25c       27     Reserved for future use     27       28     Add lines 25d, 25e, 25d, 25d, 25d, 25d, 25d, 25d, 25d, 25d  |                 | d     | Add lines 23a through 23c               |          |                       |                    |             |             |            | 23d     |       |               |
| Payments     25     Federal income tax withheld from:     25       a     Form(s) W-2     25b       b     Form(s) (1099     25b       c     Other forms (see instructions)     25c       d     Add lines 25a through 25c     25c       e     Form(s) 8288-A     25c       g     Form(s) 1042-S     25c       26     22c2     25c       27     Reserved for future use     27       28     Add lines 25d, 25e, 25d, 25d, 25d, 25d, 25d, 25d, 25d, 25d  |                 | 24    | Add lines 22 and 23d. This is your to   | otal ta  | <b>x</b>              |                    |             |             |            | 24      |       | 0.            |
| a   Form(s) W-2   25b     b   Form(s) 099   25b     26   26c     d   Add lines 25a through 25c   25d     e   Form(s) 8805   25c     f   Form(s) 828-A   25f     g   Form(s) 1042-S   25g     26   26g   25g     27   Reserved for future use   25g     26   7d   7d     27   Reserved for future use   26g     27   Reserved for future use   26g     28   Additional child tax credit from Schedule 812 (Form 1040)   28g     30   31   Amount for amount pad with Form 1040.   29     31   Amount for Schedule 3 (Form 1040), line 15   30     33   Add lines 26, 29, and 32. These are your total opyments and refundable credits   32     34   Mationes 24, sobtract line 24 sobtract line 23 sobtract line 33 form line 24. This is the amount you over.   36     Direct depoat?  | Pavments        | 25    |   |          |                       |                    |             |             |            |         |       |               |
| b   Form(s) 1099   25b     c   Other forms (see instructions)   25c     d   Add lines 25a through 25c   25d     e   Form(s) 8288-A   25e     g   Form(s) 1024-S   25g     g   Form(s) 1024-S   25g     26   2022 estimated tax payments and amount applied from 2021 return   26     27   Reserved for future use   27     28   Add lines 25d, 25e, 25d, 25d, 25d, 25d, 25d, 25d, 25d, 25d   |                 | а     | Form(s) W-2                             |          |                       |                    | 25a         |             |            |         |       |               |
| c     Other forms (see instructions)     25c       d     Add lines 25a through 25c     25d       e     Form(s) 8005     25e       f     Form(s) 8288-A     25f       g     Form(s) 8288-A     25g       26     2225 estimated tax payments and amount applied from 2021 return     26       27     Reserved for future use     26       29     Credit for amount paid with Form 1040-C     29       20     Credit for amount paid with Form 1040-C     29       30     Reserved for future use     30       31     Additions 25d, 25e, 25d, 25g, 26, ad 32. These are your total other payments and refundable credits     32       34     Add lines 25d, 25e, 25d, 25g, 26, ad 32. These are your total payments     33       35a     Amount of line 24, uput ant line 24, subt at line 24 form 183. This is the amount you overpaid     34       35a     Amount of line 24, uput ant line 24, uput ant line 24. subt at line 24 form 31 line 24. subt at li   |                 | b     |   |          |                       |                    | 25b         |             |            |         |       |               |
| d   Add lines 25a through 25c   25d     i   Form(s) 8805   25e     i   Form(s) 8805   25g     g   Form(s) 1042-S   25g     26   2222 estimated tax payments and amount applied from 201 return   26     27   Reserved for future use   28     28   Additional child tax credit from Schedule 8812 (Form 1040)   28     29   Credit for amount paid with Form 1040-C   29     30   Reserved for future use   31     31   Amount from Schedule 3 (Form 1040), line 15   31     32   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments   33     34   fline 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   B Acting number IX X X X X X X X X X X X X X X X X X X   |                 | с     |   |          |                       |                    | 25c         |             |            |         |       |               |
| e   Form(s) 8805   25e     g   Form(s) 042-S   25g     26   2022 estimated tax payments and amount applied from 2021 return   28     27   Reserved for future use   28     28   Additional child tax credit from Schedule 8812 (Form 1040)   27     29   30   Reserved for future use   30     31   Amount from Schedule 3 (Form 1040), line 15   31   32     32   Add lines 26, 25e, 261, 259, 26, and 32. These are your total other payments and refundable credits   32     33   Add lines 25d, 25e, 261, 259, 26, and 32. These are your total apayments   33     34   Jf line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   b   Bouting number   X   X   X   X   X   X   X   X   X   |                 | d     | ,                                       |          |                       |                    |             |             |            | 25d     |       |               |
| f   Form(s) 8288-A   25f     2   2022 estimated tax payments and amount applied from 2021 return   26     2   2022 estimated tax payments and amount applied from 2021 return   27     28   Additional child tax credit from Schedule 8812 (Form 1040)   28     20   Credit for amount paid with Form 1040-C   29     30   31   30     31   Amount from Schedule 3 (Form 1040), line 15   31     32   Add lines 28, 29, and 31. These are your total payments   33     34   Hiles 28, 29, and 31. These are your total payments   33     35a   Amount of line 34 you want refundable credits   32     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   b   Routing number   X  |                 | e     | •                                       |          |                       |                    |             |             |            | -       |       |               |
| g   Form(s) 1042-S   25g     26   2022 estimated tax payments and amount applied from 2021 return   27     27   Reserved for future use   27     28   28     29   Credit for amount paid with Form 1040.   28     29   Credit for amount paid with Form 1040.   29     30   Reserved for future use   30     31   Add lines 28, 29, and 31. These are your total other payments and refundable credits   32     34   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments   33     Refund   35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   b   Routing number   X   X   X   X X X   X X   X X   X X   X X   X X   |                 |       |   |          |                       |                    |             |             |            |         |       |               |
| 26   2022 estimated tax payments and amount applied from 2021 return   27   Reserved for future use   28     27   Reserved for future use   28   29     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 25, 29, and 31. These are your total other payments and refundable credits   32     33   Add lines 25, 29, and 31. These are your total payments   33     34   H lines 31 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refundable to you. If Form 8888 is attached, check here   35a     35a   Account number   X X X X X X X X X X X X X X X X X X X   |                 |       |   |          |                       |                    |             |             |            | -       |       |               |
| 27   Reserved for future use   27     28   Additional child tax credit from Schedule 8812 (Form 1040)   28     29   Credit for amount paid with Form 1040-C   29     30   30   30     31   Amount from Schedule 3 (Form 1040), line 15   31     32   Add lines 25d, 25e, 25, 25g, 25g, 25g, 25g, 25g, 25g, 25g,  |                 | -     |   |          |                       |                    |             |             |            |         |       |               |
| 28   Additional child tax credit from Schedule 8812 (Form 1040)   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 28d, 25e, 25f, 25g, 26, and 32. These are your total payments and refundable credits   32     33   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments   33     34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   b   Rotting number   X   <  |                 |       |   |          |                       |                    | 1 1         |             |            |         |       |               |
| 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 payments and refundable credits   32     33   Add lines 28, 29, and 31. These are your total other payments   33     Refund   34   33     34   35a   Amount of line 34, you want refunded to you. If Form 8888 is attached, check here   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposition   b   Roting number   X X X X X X X X X X X X X X X X X X X   |                 |       |   |          |                       |                    |             |             |            |         |       |               |
| 30   Reserved for future use .   30     31   Amount from Schedule 3 (Form 1040), line 15   31     32   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments and refundable credits .   32     33   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .   33     Refund   34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .   34     34   35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here .   .   .     9   Retund   X   |                 |       |   |          | ,                     | •                  | -           |             |            | -       |       |               |
| 31   Amount from Schedule 3 (Form 1040), line 15   31     32   Add lines 28, 29, and 31. These are your total other payments and refundable credits   32     33   Add lines 28, 29, and 31. These are your total other payments and refundable credits   32     34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a     Direct deposit?   b   Routing number   X X X X X X X X X X X X X X X X X X X  |                 |       |   |          |                       |                    |             |             |            |         |       |               |
| 32   Add lines 28, 29, and 31. These are your total other payments and refundable credits  |                 |       |   |          |                       |                    |             |             |            |         |       |               |
| 33   Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments   33     Refund   34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34     35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   33     Direct deposit?   b   Rotting number   X  |                 |       | , , , , , , , , , , , , , , , , , , ,   |          |                       |                    | -           | adite       |            | 32      |       |               |
| Refund   34   If line 33 is more than line 24, subtract line 33. This is the amount you overpaid   34     Direct deposit?   5a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   .   .   35a     Direct deposit?   b   Routing number   X X X X X X X X X X X X X X X X X X X   |                 |       |   |          |                       |                    |             |             |            | -       |       |               |
| 35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   Image: Checking is a transmission of the set of the | Dofund          |       |   |          |                       |                    |             |             |            |         |       |               |
| Direct deposit?<br>See instructions.   b   Routing number   X <t< th=""><th>neiuliu</th><th></th><th></th><th></th><th></th><th></th><th>•</th><th>-</th><th></th><th>_</th><th></th><th></th></t<>  | neiuliu         |       |   |          |                       |                    | •           | -           |            | _       |       |               |
| See instructions.   d   Account number   X   <   | Direct deposit? |       |   |          |                       |                    |             |             |            | 000     |       |               |
| e   If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.     36   Amount of line 34 you want applied to your 2023 estimated tax   36     Amount You Owe   37   Subtract line 33 from line 24. This is the amount you owe.<br>For details on how to pay, go to www.irs.gov/Payments or see instructions   37   0.     38   Estimated tax penalty (see instructions)   |                 |       |   |          |                       |                    |             | -           | Savings    |         |       |               |
| enter it here.     36   Amount of line 34 you want applied to your 2023 estimated tax   36     Amount You Owe   37   Subtract line 33 from line 24. This is the amount you owe.<br>For details on how to pay, go to www.irs.gov/Payments or see instructions.   37   0.     38   Estimated tax penalty (see instructions)   38   37   0.     38   Estimated tax penalty (see instructions)   38   38     Third<br>Party   Do you want to allow another person to discuss this return with the IRS? See instructions.   Yes. Complete below.   No     Designee   Do you want to allow another person to discuss this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Sign   Your signature   Date   Your occupation   If the IRS sent you an Identity Protection PIN, enter it here (see inst.)     Phone no.   Email address   Email address   Email address     Paid   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed<  |                 |       |   |          |                       |                    |             |             | nago 1     |         |       |               |
| 36   Amount of line 34 you want applied to your 2023 estimated tax   36     Amount<br>You Owe   37   Subtract line 33 from line 24. This is the amount you owe.<br>For details on how to pay, go to www.irs.gov/Payments or see instructions.   37   0.     38   Estimated tax penalty (see instructions)   38   Image: State of the second  |                 | е     |   |          |                       |                    |             |             |            |         |       |               |
| You Owe   For details on how to pay, go to www.irs.gov/Payments or see instructions.   37   0.     38   Estimated tax penalty (see instructions)   38   Image: State of the state   |                 | 36    | Amount of line 34 you want applied      | l to you | ur 2023 estimat       | ed tax             | 36          |             |            |         |       |               |
| 38 Estimated tax penalty (see instructions)   38     Third   Do you want to allow another person to discuss this return with the IRS? See instructions.   Yes. Complete below.   X No     Party   Designee's   Phone   Personal identification   Number (PIN)     Designee   Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Sign   Your signature   Date   Your occupation   If the IRS sent you an Identity Protection PIN, enter it here (see inst.)     Phone no.   Email address   Preparer's signature   Date   PTIN   Check if:     Preparer   SYAM PRIYA RAM SAGAR GUPTA TALLAM   Description   Date   Point on.   Check if:     Preparer   Stam   GLOBAL TAXES LLC   Phone no.   CATS 965-952  | Amount          | 37    | Subtract line 33 from line 24. This is  | the ar   | nount you owe         |                    |             |             |            |         |       |               |
| Third<br>Party<br>Designee   Do you want to allow another person to discuss this return with the IRS? See instructions.   Yes. Complete below.   No     Designee   Designee's<br>name   Phone   Personal identification<br>number (PIN)   Personal identification     Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and<br>belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Your signature   Date   Your occupation   If the IRS sent you an Identity<br>Protection PIN, enter it here<br>(see inst.)     Phone no.   Email address     Preparer's name   Preparer's signature   Date   PTIN     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES LLC   Phone no. (678) 965–9522   Phone no. (678) 965–9522   Phone no. (678) 965–9522  | You Owe         |       | For details on how to pay, go to ww     | w.irs.g  | <i>ov/Payments</i> or | see instructions . |             |             |            | 37      |       | 0.            |
| Party<br>Designee   Designee's<br>name   Phone<br>name   Phone<br>no.   Personal identification<br>number (PIN)     Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and<br>belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Your signature   Date   Your occupation   If the IRS sent you an Identify<br>Protection PIN, enter it here<br>(see inst.)     Phone no.   Email address     Preparer's name   Preparer's signature   Date   PTIN     Phone no.   Email address     Preparer   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's address   245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN 84-3171965   |                 | 38    | Estimated tax penalty (see instruction  | ons) .   |                       |                    | 38          |             |            |         |       |               |
| Designee   name   no.   number (PIN)     Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Your signature   Date   Your occupation   If the IRS sent you an Identity Protection PIN, enter it here (see inst.)     Phone no.   Email address   Email address   Email address     Preparer   Date   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   Date   Phone no. (678) 965-9522     Firm's name   GLOBAL TAXES LLC   Phone no. (678) 965-9522   Firm's EIN   84-3171965   | Third           | Do yo | u want to allow another person to dis   | scuss t  | his return with th    | ne IRS? See instru | ctions.     | 🗌 Ye        | s. Comp    | lete be | ow.   | X No          |
| Sign   Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Your signature   Date   Your occupation   If the IRS sent you an Identity Protection PIN, enter it here (see inst.)     Phone no.   Email address     Preparer   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES   LLC   Phone no. (678)965-9522   Firm's EIN   84-3171965  |                 | Desig | nee's                                   |          | Phone                 |                    |             | Persor      | al identif | ication |       |               |
| Sign<br>Here   belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.     Your signature   Date   Your occupation   If the IRS sent you an Identity<br>Protection PIN, enter it here<br>(see inst.)     Phone no.   Email address     Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES   LLC   Phone no. (678)965-9522   Phone no. (678)965-9522     Firm's address   245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN   84-3171965   | Designee        | name  |   |          | no.                   |                    |             | numbe       | er (PIN)   |         |       |               |
| Sign<br>Here   Your signature   Date   Your occupation   If the IRS sent you an Identity<br>Protection PIN, enter it here<br>(see inst.)     Phone no.   Email address     Paid<br>Preparer<br>Use Only   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES   LLC   Phone no. (678) 965-9522   Phone no. (678) 965-9522     Firm's address   245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN   84-3171965   |                 |       |   |          |                       |                    |             |             |            |         |       |               |
| Here   Protection   PIN, enter it here<br>(see inst.)     Phone no.   Email address     Paid   Preparer's name   Preparer's signature     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024     Polo 2082703   Self-employed     Firm's name   GLOBAL TAXES   LLC     Firm's address   245 ROONEY   CT E BRUNSWICK NJ 08816   | Sign            |       |   | aration  |                       |                    |             | Innormatio  |            |         |       |               |
| Phone no.   Email address     Paid   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   O4/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES   LLC   Phone no. (678)965-9522     Firm's address   245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN   84-3171965  | -               | Your  | signature                               |          | Date                  | Your occupation    |             |             |            |         |       |               |
| Paid   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/03/2024   P02082703   □ Self-employed     Image: Stam price of the state of th  | пеге            |       |   |          |                       | STUDENT            |             |             |            |         |       |               |
| Paid   Preparer's name   Preparer's signature   Date   PTIN   Check if:     SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/03/2024   P02082703   □ Self-employed     Image: Stam price of the state of th  |                 | Phon  | e no.                                   |          | Email address         |                    |             |             | ,          | ,       |       |               |
| Preparer   SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/03/2024   P02082703   Self-employed     Syam Priya RAM Sagar GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/03/2024   P02082703   Self-employed     Firm's name   GLOBAL TAXES   LLC   Phone no. (678)965-9522     Firm's address   245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN   84-3171965  | Deid            |       |   | eparer   |                       |                    | Date        |             | PTIN       |         | Check | if:           |
| Preparer     Firm's name     GLOBAL TAXES     LLC     Phone no.     (678)965-9522       Use Only     Firm's address     245 ROONEY CT E BRUNSWICK NJ 08816     Firm's EIN     84-3171965   |                 | •     |   | 0        | CUPTA TALLAM          |                    | 3/2024      |             | 2703       |         |       |               |
| Use Only     Firm's address     245 ROONEY CT E BRUNSWICK NJ 08816     Firm's EIN     84-3171965   | -               |       |   |          |                       |                    | 1 0 1, 0    | -, _, _, _, |            |         |       |               |
|  | Use Only        |       |   |          |                       |                    |             |             |            |         |       |               |
|  | Go to www.irs.  |       | 210 11001121 01                         |          |                       | 5 00010            | RFV         | 07/14/23 PR |            |         |       |               |

## SCHEDULE NEC (Form 1040-NR)

# Tax on Income Not Effectively Connected With a U.S. Trade or Business Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

OMB No. 1545-0074

22

20

Attachment

Department of the Treasury Internal Revenue Service

NL \_

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Sequence No. 7B Your identifying number

035-59-7432

| Name shown on Form | 1040-NR |      |
|--------------------|---------|------|
| VIVEKANANDA        | REDDY   | KOTA |

| Enter a            | amount of income und  | er the appropriate rate of tax. See instructions.   |                          |            |                                    | 1                      |                         |  |  |
|--------------------|---|---|--------------------------|------------|------------------------------------|------------------------|-------------------------|--|--|
|                    |   | Nature of Income  |                          |            | <b>(a)</b> 10%                     | <b>(b)</b> 15%         | (c) 30%                 |  | (specify)  |
|                    |   |   |                          |            |                                    | (,, )                  | (1)                     | %  | %  |
| 1                  | Dividends and divide  | •   |                          |            |                                    |                        |                         |  |  |
| а                  | Dividends paid by U   |   |                          | <b>1</b> a |                                    |                        |                         |  |  |
| b                  |   | reign corporations  |                          | 1b         |                                    |                        |                         |  |  |
| С                  | Dividend equivalent p   | payments received with respect to section 871(m) to   | ransactions              | 1c         |                                    |                        |                         |  |  |
| 2                  | Interest:   |   |                          |            |                                    |                        |                         |  |  |
| а                  |   |   |                          | 2a         |                                    |                        |                         |  |  |
| b                  |   | orations  |                          | 2b         |                                    |                        |                         |  |  |
| С                  |   |   |                          | 2c         |                                    |                        |                         |  |  |
| 3                  | •   | oatents, trademarks, etc.)  |                          | 3          |                                    |                        |                         |  |  |
| 4                  | •   | ′ copyright royalties ...........   |                          | 4          |                                    |                        |                         |  |  |
| 5                  |   | /rights, recording, publishing, etc.)   |                          | 5          |                                    |                        |                         |  |  |
| 6                  | Real property income and natural resources royalties  |   |                          | 6          |                                    |                        |                         |  |  |
| 7                  | Pensions and annuities  |   |                          | 7          |                                    |                        |                         |  |  |
| 8                  | Social security benefits  |   |                          | 8          |                                    |                        |                         |  |  |
| 9                  | Capital gain from line 18 below   |   |                          | 9          |                                    |                        |                         |  |  |
| 10                 | Gambling—Residents of Canada only. Enter net income in column (c).<br>If zero or less, enter -0 |   |                          |            |                                    |                        |                         |  |  |
| а                  | Winnings  |   |                          |            |                                    |                        |                         |  |  |
| b                  | Losses  |   |                          | 10c        |                                    |                        |                         |  |  |
| 11                 | Note: Losses not all  | -Residents of countries other than Canada.<br>owed  |                          | 11         |                                    |                        |                         |  |  |
| 12                 | Other (specify):  |   |                          | 10         |                                    |                        |                         |  |  |
| 13                 | Add lines 1s through  | 12 in columns (a) through (d)   |                          | 12<br>13   |                                    |                        |                         |  |  |
| 13                 | -   | rate of tax at top of each column   |                          | 13         |                                    |                        |                         | -  |  |
| 14                 |   | ffectively connected with a U.S. trade or busines   |                          |            | through (d) of line 1              | / Enter the total hars | and an Form 1040        | )-NR. line 23a <b>15</b>                                       |  |
| 15                 | Tax on income not e   | Capital Gains and   |                          |            |                                    |                        |                         |  |  |
| Enter o            | nly the capital gains and   |   |                          | 10111      |                                    |                        | - y                     | (81.000  |  |
| losses f<br>exchan | from property sales or<br>ges that are from sources<br>he United States and not                 | 16 (a) Kind of property and description<br>(if necessary, attach statement of<br>descriptive details not shown below) | (b) Date acq<br>mm/dd/yy |            | <b>(c)</b> Date sold<br>mm/dd/yyyy | (d) Sales price        | (e) Cost or other basis | (f) LOSS<br>If (e) is more than (d),<br>subtract (d) from (e). | (g) GAIN<br>If (d) is more than (e),<br>subtract (e) from (d). |
| effectiv           | ely connected with a U.S.<br>s. Do not include a gain   |   |                          |            |                                    |                        |                         |  |  |
| or loss            | on disposing of a U.S. real   |   |                          |            |                                    |                        |                         |  |  |
| gains a            | y interest; report these<br>nd losses on Schedule D   |   |                          |            |                                    |                        |                         |  |  |
| (Form 1            |   |   |                          |            |                                    |                        |                         |  |  |
|                    | property sales or<br>ges that are effectively   |   |                          |            |                                    |                        |                         |  |  |
| connec             | ted with a U.S. business<br>edule D (Form 1040),  | 17 Add columns (f) and (g) of line 16   |                          |            |                                    |                        | 17                      |  |  |
|                    | 797, or both.   | 18 Capital gain. Combine columns (f) and (  | (g) of line 17           | 7. Ente    | er the net gain her                | re and on line 9 abo   | ove. If a loss, ente    | er -0 <b>18</b>  |  |
| For Pa             | perwork Reduction A   | ct Notice, see the Instructions for Form 1040-NR  |                          |            | REV                                | 07/14/23 PRO           |                         | Schedule NEC   | (Form 1040-NR) 2022  |

| SCHE  | DULE   | ΟΙ  |
|-------|--------|-----|
| (Form | 1040-N | IR) |

## Other Information

| SCHE     | DULE OI                              |                                    | Othe   | r Information           |  |                | OMB No. 15                      | 45-0074     |  |
|----------|--------------------------------------|------------------------------------|--|-------------------------|--|----------------|---------------------------------|-------------|--|
| (Form    | 1040-NR)                             | Go t                               | o www.irs.gov/Form1040N                                    | R for instructions and  | the latest information                         | . [            | 20                              | >>          |  |
|          | ent of the Treasury                  |                                    |  | h to Form 1040-NR.      |  |                | Attachment                      |             |  |
|          | Revenue Service<br>nown on Form 1040 |                                    | Ans  | wer all questions.      |  | Your identify  | Sequence N                      | lo. 7C      |  |
|          | KANANDA RE                           |                                    |  |                         |  | 035-59-        | •                               |             |  |
| <b>A</b> |                                      |                                    | vere you a citizen or nation                               | al during the tax year  |  |                | -                               |             |  |
| В        | In what country                      | / did vou claim                    | residence for tax purpose                                  | s during the tax year?  | United States                                  |                |                                 |             |  |
| c        | Have you ever                        | applied to be a                    | green card holder (lawful p                                | permanent resident) of  | the United States? .                           |                | Yes                             | No          |  |
| D        | Were you ever:                       |                                    |  |                         |  |                |                                 |             |  |
|          | A U.S. citizen?                      |                                    |  |                         |  |                |                                 | X No        |  |
| 2.       | •                                    | • •                                | rmanent resident) of the Ur                                |                         |  |                | Yes                             | 🗙 No        |  |
| _        | -                                    |                                    | ?), see Pub. 519, chapter 4,                               |                         |  |                |                                 |             |  |
| E        | immigration sta                      | tus on the last o                  | day of the tax year, enter day of the tax yearF1           |                         |  |                | -                               |             |  |
| F        | Have you ever                        | changed your v<br>1 "Yos " indicat | risa type (nonimmigrant sta<br>e the date and nature of th | itus) or U.S. immigrati | on status?                                     |                | Yes                             | X No        |  |
| G        | l ist all dates vo                   | u entered and                      | left the United States durin                               | a 2022 See instruction  | <br>nns  |                |                                 |             |  |
| ŭ        |                                      |                                    | Canada or Mexico AND cor                                   | •                       |  | uent intervals | 5.                              |             |  |
|          |                                      |                                    | Mexico and skip to item I                                  |                         |  |                |                                 |             |  |
|          | Date entered                         | United States                      | Date departed United Stat<br>mm/dd/yy                      | es Da                   | ate entered United State<br>mm/dd/yy           | es Date de     | eparted Unite<br>mm/dd/yy       |             |  |
|          |                                      | uu/yy                              | iiiii/dd/yy  |                         | min/dd/yy                                      |                | mm/dd/yy                        |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
| н        |                                      |                                    | vacation, nonworkdays, and<br>, 2021                       |                         |  |                | <b>j</b> :                      |             |  |
| I        | Did you file a U                     | .S. income tax                     | return for any prior year? .<br>nd form number you filed:  |                         |  |                | Yes                             | 🛛 No        |  |
| J        | Are you filing a                     | return for a true                  | st?  |                         |  |                | Yes                             | 🗙 No        |  |
|          |                                      |                                    | U.S. or foreign owner under<br>ribution from a U.S. person |                         |  |                |                                 | 🗌 No        |  |
| κ        | Did you receive                      | total compens                      | ation of \$250,000 or more                                 | during the tax year? .  |  |                | Yes                             | 🗙 No        |  |
|          | If "Yes," did yo                     | u use an alterna                   | ative method to determine                                  | the source of this con  | pensation?                                     |                | . 🗌 Yes                         | 🗌 No        |  |
| L        |                                      |                                    | f you are claiming exempt<br>v. See Pub. 901 for more in   |                         |  | tax treaty w   | ith a foreigr                   | ו country   |  |
| 1.       |                                      |                                    | the applicable tax treaty and e columns below. Attach Fe   |                         |  | claimed the    | treaty benef                    | it, and the |  |
|          |                                      | <b>(a)</b> Cou                     | ntry   | (b) Tax treaty article  | (c) Number of month<br>claimed in prior tax ye |                | Amount of ex<br>le in current t |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          |                                      |                                    |  |                         |  |                |                                 |             |  |
|          | (e) Total. Enter                     | r this amount o                    | n Form 1040-NR, line 1k. D                                 | Do not enter it anvwhe  | re else on line 1 .                            |                |                                 |             |  |
| 2.       |                                      |                                    | preign country on any of the                               |                         |  |                | Yes                             | No          |  |
|          |                                      |                                    | ts pursuant to a Competen                                  |                         |  |                | . 🗌 Yes                         | 🗙 No        |  |
|          | If "Yes," attach                     | a copy of the (                    | Competent Authority deterr                                 | mination letter to your | return.  |                |                                 |             |  |

Μ 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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . . . . . . . . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 07/14/23 PRO Schedule OI (Form 1040-NR) 2022