Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Internal neve	enue del vice								
Submissi	on Identification Number (SID)								
Taxpayer's	name	Social sec	Social security number						
VAMSI	KRISHNA SADINENI	038-4	038-45-2733						
Spouse's na	ame	Spouse's	social sec	urity numbe	r				
					`				
Part I	-	3 (Enter year you	ı are au	thorizing.	.)				
	ole dollars only on lines 1 through 5.								
	rm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. djusted gross income		. 1	Ι 4	792.				
	otal tax			1	0.				
	ederal income tax withheld from Form(s) W-2 and Form(s) 1099				459.				
	mount you want refunded to you				459.				
	mount you owe				137.				
Part II	Taxpayer Declaration and Signature Authorization (Be sure you go	et and keep a c	opy of y	our retu	ırn)				
my knowle return (origito send my for any del Agent to in payment of authorizati payment, business of taxes to re personal id	nalties of perjury, I declare that I have examined a copy of the income tax return (original or edge and belief, it is true, correct, and complete. I further declare that the amounts in P ginal or amended) I am now authorizing. I consent to allow my intermediate service provide y return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas lay in processing the return or refund, and (c) the date of any refund. If applicable, I authoritiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellidays prior to the payment (settlement) date. I also authorize the financial institutions involve eceive confidential information necessary to answer inquiries and resolve issues related dentification number (PIN) below is my signature for the income tax return (original or ame Funds Withdrawal Consent.	art I above are the a er, transmitter, or ele on for rejection of the rize the U.S. Treasur count indicated in the il institution to debit terminate the author ation requests must ed in the processing I to the payment. I	amounts in ctronic rele transming and its entry the entry or ization. The election of the elec	from the inturn original ssion, (b) the designated paration so to this according to the control of the control	come tax ator (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the				
	r's PIN: check one box only								
		enerate my PIN	5 2 '	7 3 3	as my				
_	ERO firm name signature on the income tax return (original or amended) I am now authorizing.			digits, but er all zeros	,				
L i	I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN and your return is filed using the Practitioner F below.								
Your sign	nature ▶	Date ▶							
Snouse's	s PIN: check one box only								
· —	-	enerate my PIN			as my				
	ERO firm name	enerate my mi	Enter five digits, but						
:	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all zeros					
i	I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN and your return is filed using the Practitioner F below.								
Spouse's	s signature ► E	Date ►							
	Practitioner PIN Method Returns Only—continue	e below							
Part III	Certification and Authentication — Practitioner PIN Method Only								
ERO's El	FIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 0	8 2 7	7 1				
			enter all ze	eros					
authorized	at the above numeric entry is my PIN, which is my signature for the electronic individual I to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I nts of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Prov	am submitting this	return in a	accordance					
ERO's sig	gnature ▶ □	Date ►							
	ERO Must Retain This Form — See Instruc								
	Don't Submit This Form to the IRS Unless Request								

E1040-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–C	Dec. 31, 2023, or other tax year begin	nning	, 2023,	ending		, , 2	20		ee separate structions.		
Your first name and middle initial			Last name Your identifying (see instructions)									
VAMSI KRISHNA			SADI	SADINENI						038-45-2733		
Home address	(numl	oer and street). If you have a P.O. bo	ox, see ins	tructions.			•			Apt. no.		
2622 N 11	.0TH	I CT								110		
City, town, or p	ost o	ffice. If you have a foreign address,	also comp	lete spaces below.			State	:	ZIP co	de		
OMAHA							NE		6816	4		
Foreign country	nam	е	Foreigi	n province/state/county			Foreign p	ostal cod	e			
Filing Status	1	Single			ng surviving		,	Esta	ate	☐ Trust		
Check only one box.	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depender											
Digital Assets		ny time during 2023, did you: (a) recervise dispose of a digital asset (or a						(b) sell, e				
Dependents (see instructions):		(1) First name Last nam	e	(2) Dependent's identifying number	(3) Relation	nship to you	Chile	ck the box	, C	fies for (see inst.): Credit for other dependents		
If more than four dependents, see												
instructions and												
check here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see i	nstructions)				. 1a		4,792.		
Effectively	b	Household employee wages not re	eported or	Form(s) W-2				. 1b				
Connected	С	Tip income not reported on line 1a	(see instr	uctions)				. 1c				
With U.S.	d	Medicaid waiver payments not rep		, ,	•							
Trade or	е	Taxable dependent care benefits f		·				1e				
Business	f	f Employer-provided adoption benefits from Form 8839, line 29										
Attach	g	•						1g 1h				
Form(s) W-2,	h											
1042-S,	i	Reserved for future use						. 1j				
SSA-1042-S, RRB-1042-S,	J	j Reserved for future use										
and 8288-A here. Also	k	Total income exempt by a treaty fr line 1(e)		ule OI (Form 1040-NR), i · · · · · · · ·		ι						
attach Form(s)	Z	Add lines 1a through 1h	1	1				. 1z		4,792.		
1099-R if	2a	· —	2a		able interes			2b				
tax was	_		3a		linary divide			3b				
withheld.	4a		4a		able amoun							
If you did not get a Form	5a	_	5a		able amoun							
W-2, see	6	Reserved for future use										
instructions.	7 8	Additional income from Schedule	•	, .	•			_				
	9									4,792.		
	10	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to										
	11	Subtract line 10 from line 9. This is								4,792.		
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)									13,850.		
	13a Qualified business income deduction from Form 8995 or Form 8995-A . 13a											
	b	Exemptions for estates and trusts	only (see i	instructions)	13	b						
	С	Add lines 13a and 13b						13c				
	14									13,850.		
	15	Subtract line 14 from line 11. If zer	o or less	enter -0 This is your ta	xable incom	ne .		15	1	0.		

Form 1040-NR (2	2023)									Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1	14 2 [4972	2 :	3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	3						17	0.
	18	Add lines 16 and 17							18	0.
	19	Child tax credit or credit for other depender	nts from Schedu	ıle 8812 (Fo	rm 104	0) .			19	
	20	Amount from Schedule 3 (Form 1040), line 8							20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zero or less,	, enter -0						22	0.
	23a	Tax on income not effectively connected with Schedule NEC (Form 1040-NR), line 15	th a U.S. trade o			23a				
	b	Other taxes, including self-employment tax line 21	, from Schedule	2 (Form 10	040),	23b				
	С	Transportation tax (see instructions)			Г	23c				
	d	Add lines 23a through 23c			-				23d	
	24	Add lines 22 and 23d. This is your total tax							24	0.
Payments	25	Federal income tax withheld from:								
	а	Form(s) W-2			.	25a		459.		
	b	Form(s) 1099			. [25b				
	С	Other forms (see instructions)			. [25c				
	d	Add lines 25a through 25c							25d	459.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amount a	applied from 20	22 return .					26	
	27	Reserved for future use			- 1	27				
	28	Additional child tax credit from Schedule 88			- 1	28				
	29	Credit for amount paid with Form 1040-C				29				
	30	Reserved for future use			- 1	30				
	31	Amount from Schedule 3 (Form 1040), line				31				
	32	Add lines 28, 29, and 31. These are your to				ole cr	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. Th							33	459.
Refund	34	If line 33 is more than line 24, subtract line 2							34	459.
riciana	35a	Amount of line 34 you want refunded to yo				-	=	_	35a	459.
Direct deposit?	b	Routing number 0 8 1 0 0 0		c Type:	_	Check		Savings		
See instructions.	d	Account number 3 5 5 0 1 3						ourgo		
	e	If you want your refund check mailed to an			l State	s not	i shown on	nage 1		
	Ŭ	enter it here.								
	36	Amount of line 34 you want applied to you			<u>-</u>	36				
Amount	37	Subtract line 33 from line 24. This is the am		ou tux .	•					
You Owe	•-	For details on how to pay, go to www.irs.go	•	see instructi	ions .				37	
rou owe	38	Estimated tax penalty (see instructions) .				38			0.	
Third		Do you want to allow another person to discuss this return with the IRS? See instructions.							lete be	low. 🗵 No
Party										
Designee	_	Designee's Phone Personal i name no. number (F					lication			
	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 occur	nation			l If th	e IRS s	ent you an Identity
Here			rour occup				I		PIN, enter it here	
				SOFTWAR	RE EI	NGIN	IEER	(see	inst.)	
	Phon		Email address							
Paid	Prepa	arer's name Preparer's	s signature		Ţ	Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRI	IYA RAM SAGAR	GUPTA TA	LLAM	02/1	4/2024	P0208	2703	Self-employed
-	Firm's name GLOBAL TAXES LLC Phone						10. (6	78)965-9522		
Use Only	Firm's address 245 ROONEY CT E BRIINSWICK NJ 08816 Firm's El								4-3171965	

BAA

SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

VAMSI KRISHNA SADINENI 038-45-2733 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 Motion picture or TV copyright royalties 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Name shown on Form 1040-NR

Internal Revenue Service

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

2023
Attachment Sequence No. 7C

Your identifying number

038-45-2733 VAMSI KRISHNA SADINENI Of what country or countries were you a citizen or national during the tax year? _INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date departed United States **Date entered United States Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 ______, 2022 ______, and 2023 ______365 ___. ⊠ No ☐ Yes ı If "Yes," give the latest year and form number you filed: X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a □ No Yes ⊠ No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United