

SAGARIKA DUBBAKA 400 E 33RD ST, 2200 CHICAGO, IL 60616

Dear SAGARIKA,

Enclosed please find two copies of your 2024 federal income tax return, which you prepared through Sprintax tax software.

File one copy with the Internal Revenue Service and retain the second copy for your records.

#### **Tax Summary**

Filing Status	Other single nonresident alien
Gross Income	\$10090
Federal Adjusted Gross Income	\$10090
Federal Taxable Income	\$0
Refund Amount / Amount You Owe	\$0

<sup>\*</sup> We have attached instructions detailing how to file your tax return with the IRS.

#### How much tax do I owe?

Your return indicates that your balance has been paid in full. You have neither a refund due nor a balance to pay. However, you still must file your tax return with the IRS. Do not provide a payment with the return.

#### How do I file my tax return?

Your tax return must be received by April 15th. However, we recommend that you mail your federal return as soon as possible, using the United States Post Office certified mail service, to: If you want to use approved Private Delivery Service, please mail it to:

Department of the Treasury Internal Revenue Service Austin, TX 73301-0215, USA Austin - Internal Revenue Submission Processing Center 3651 S IH35, Austin, TX 78741, USA



## Federal Tax Return checklist

1. Review and sign the following form(s) where indicated with a pen mark.

Form	Action
1040-NR	Sign on page 2
W8BEN	Sign on page 1 (if present)
8843	No need to sign when attached to 1040-NR

**2.** Attach copies of all your income and tax withholding statements showing the US income sources you us ed to prepare your tax return:

Income Document	Quantity
W-2 form(s), Copy B *	1

- \* If there is a difference between copies B and C, please attach Copy C to your Federal tax return.
- 3. Confirm that the SSN on all your W2(s) is correct
  - **3.1.** If you don't have your W2(s) or your SSN on your payment document(s) is incorrect, then you'll need to obtain an updated W2 from your employer(s).
- **4.** We recommend you mail your federal return with all necessary supporting documents and attachments as soon as possible using the United States Post Office certified mail service, to:

If you want to use approved Private Delivery Service, please mail it to:

Department of the Treasury Internal Revenue Service Austin, TX 73301-0215, USA Austin - Internal Revenue Submission Processing Center 3651 S IH35, Austin, TX 78741, USA



### Federal Tax Return Frequently Asked Questions

#### How long will it take to process my US tax return?

The IRS will take between 4-6 weeks to process your return, however exact timelines are determined by the IRS.

#### What is the April 1. th deadline?

The April 15th tax deadline is the date by which all tax returns must be filed for the previous year. If you owe the IRS money and you don't file your tax return by April 15th, the US tax authorities will impose late filing penalties and interest on the amount you owe, so the sooner you submit your tax return, the better.

#### How do I know what's happening with my tax return?

You can check the status of your federal tax return at any time by using "Where's My Refund?", an interactive tool available at www.IRS.gov. You can also call the IRS TeleTax System at 800-829-4477 or the IRS Refund Hotline at 800-829-1954.

When you call the IRS or visit the website, you'll need the following:

- The first SSN/ITIN shown on your federal tax return. If you recently applied for an ITIN, you will need to wait for your ITIN notice in order to check your refund status online or you can just call with a copy of your tax return in front of you.
- Your filing status (as indicated at the top of your 1040-NR, Filing status section)
- The exact amount of the refund shown on your federal return (\$amount of the refund)

#### What if I don't have a Social Security Number

If you never received a Social Security Number you'll need to organize a temporary number. This is called an Individual Taxpayer Identification Number (ITIN). If you did no apply for an ITIN within Sprintax, you can still apply for it at www.taxback.com/usa-ITIN-numbers.asp.

#### What is a W2 form?

The W2 form shows the amount of money you earned from that empl oyer and the amount of tax you paid on that income. The W2 form is the official government form you re eive from your employer(s) in January after the tax year ends. To claim your US tax refund, the IRS will need copies of your W2 form(s) or final payslips

If you've misplaced your W2(s) / final payslips or never received it, you'll need to request a new one from your employer.

#### What is a 1042-S form?

If you've worked as a trainee, student, teacher or researcher in the US on a Jor F visa, you might have received a 1042-S form instead of a W2 form.

It outlines income such as scholarships, fellowships, self-empl oyment or grants and any income exempt from tax because of a tax treaty. We can use either the W2 or 1042-S to apply for your tax refund.

You should receive the 1042-S by mid-March of the year following the tax year.



## Federal Tax Return Frequently Asked Questions

#### What tax returns can I prepare through Sprintax?

With Sprintax, you can prepare your Federal and State tax returns, FICA tax claim and other required tax forms. Once your taxes are prepared, you will need to mail them to the IRS. Sprintax cannot e-file them for you or mail them to the IRS for you.

#### Can I use an international tax treaty?

Depending on your nationality and other conditions you may be able to claim a tax refund under international "tax treaties", which are agreements between the US and other countries that allow you to claim back tax you paid while working abroad.

Sprintax always checks if you're eligible for an international tax treaty when we prepare your US tax return. Your eligibility depends on factors like your nationality, length of stay, purpose of stay, type of income, your visa and other.

#### Could I owe money to the US tax authorities?

Depending on how your employer taxed you and what the actual tax liability under the tax law is, you may owe tax or be due a tax refund. If you have a tax liability or if other particular factors apply, then you have an obligation to file a tax return. Sprintax takes into consideration all of these factors.

Remember, if you owe money and don't file your return before the April 15th deadline, you'll get penalties and fines added to the amount you owe.



# sprintax

# Federal Tax Return for

SAGARIKA DUBBAKA 2024

FEDERAL FILING COPY
SIGN AND MAIL TO THE INTERNAL REVENUE SERVICE

## Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2024 OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2024, or other tax year beginr			ning, 2024, ending, 20_					instructions.		
Your first name	and r	middle initial						our identifying number see instructions)		
SAGARIKA			DUBB	AKA			8 7 5	5 9 0 6 8 7		
Home address	(numb	per and street). If you have a P.O. box	see ins	tructions.			-	Apt. no.		
400 E 33RD S1	Γ							2200		
City, town, or p	ost of	fice. If you have a foreign address, als	o comp	lete spaces below.		State	7	ZIP code		
CHICAGO						IL		60616		
Foreign country	/ nam	е	Foreign	n province/state/county		Foreign	postal cod	le		
Filing Status		Single Married filing sepa	• .		ng surviving spouse		Esta	ate 🗌 Trust		
Check only one box.										
Digital Assets		ny time during 2024, did you: (a) recei rwise dispose of a digital asset (or a fi						exchange, or .		
<b>Dependents</b>	;					(4) Ch	eck the box	if qualifies for (see inst.):		
(see instructions)	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to y	Chi	ld tax credit	Credit for other dependents		
		(i) i i i ci i i i i i i i i i i i i i i		,	(b) Holationomp to y			П		
If more than four							$\Box$	+		
dependents, see instructions and							Ħ	<del>                                     </del>		
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	10090		
Effectively	b	Household employee wages not repe	•	,				1000		
Connected	С	Tip income not reported on line 1a (s		* *						
With U.S.	d	Medicaid waiver payments not repor		•			. 1d			
Trade or	е	Taxable dependent care benefits fro		( )	,		. 1e			
Business	f	Employer-provided adoption benefits		·			. 1f			
240000	g	Wages from Form 8919, line 6		•			. 1g			
Attach	h	Other earned income (see instruction	. 1h							
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		,	item L,		0			
attach	z	Add lines 1a through 1h					. 1z	10090		
Form(s) 1099-R if	<b>2</b> a	Tax-exempt interest 2a		<b>b</b> Tax	kable interest		. 2b			
tax was	3a	Qualified dividends 3a		<b>b</b> Ord	dinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a		0 <b>b</b> Tax	kable amount		. 4b	0		
If you did not	5a	Pensions and annuities 5a		0 <b>b</b> Tax	kable amount		. 5b	0		
get a Form W-2, see	6	Reserved for future use					. 6			
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,		_		0		
	8	Additional income from Schedule 1 (	Form 10	040), line 10			. 8	0		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively of	onnected income		. 9	10090		
	10	Adjustments to income from Schedincome	,	,,	•			0		
	11	Subtract line 10 from line 9. This is y	our <b>adj</b> u	ısted gross income			. 11	10090		
	12	Itemized deductions (from Schedu deduction (see instructions) . Stand	le A (Fo	rm 1040-NR)) or, for ce duction Allowed Under U	rtain residents of Inc J.S India Income Ta	lia, standa ax Tṛeaṭy	ard . <b>12</b>	14600		
	13a Qualified business income deduction from Form 8995 or Form 8995-A . 13a									
	b	Exemptions for estates and trusts or	ıly (see i	nstructions)	13b					
	С	Add lines 13a and 13b					. 13c			
	14	Add lines 12 and 13c					. 14	14600		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b>	xable income .		. 15	0		

Form 1040-NR (2	2024)												Page 2
Tax and	16	Tax (see instructions). Check if any	from Fo	rm(s): <b>1</b> 88	314 <b>2</b>	<u>497</u>	'2 ;	3 🗌			16		
Credits	17	Amount from Schedule 2 (Form 10									17		(
	18	Add lines 16 and 17									18		(
	19	Child tax credit or credit for other									19		(
	20	Amount from Schedule 3 (Form 10	040), line	8							20		(
	21	Add lines 19 and 20									21		(
	22	Subtract line 21 from line 18. If ze	ro or less	s, enter -0							22		(
	23a	Tax on income not effectively conschedule NEC (Form 1040-NR), lin					23a			0			
	b	Other taxes, including self-employ line 21	•	•	•	,.	23b			0			
	С	Transportation tax (see instruction	ns)				23c			0			
	d	Add lines 23a through 23c					·				23d		(
	24	Add lines 22 and 23d. This is your									24		(
Payments	25	Federal income tax withheld from											
,	а	Form(s) W-2					25a			0			
	b	Form(s) 1099					25b			0			
	С	Other forms (see instructions) .					25c			0			
	d	Add lines 25a through 25c					·				25d		(
	е	Form(s) 8805									25e		(
	f	Form(s) 8288-A									25f		(
	g	Form(s) 1042-S									25g		(
	26	2024 estimated tax payments and	l amount	applied from 20	23 return						26		(
	27	Reserved for future use					27						
	28	Additional child tax credit from Sc	hedule 8	3812 (Form 1040	)		28			0			
	29	Credit for amount paid with Form	1040-C				29			0			
	30	Reserved for future use					30						
	31	Amount from Schedule 3 (Form 10	040), line	15			31			0			
	32	Add lines 28, 29, and 31. These a	re your <b>t</b> e	otal other paym	ents and	refunda	able cr	edits .			32		(
-	33	Add lines 25d, 25e, 25f, 25g, 26, a	and 32. T	hese are your to	tal paym	ents .					33		(
Refund	34	If line 33 is more than line 24, sub	tract line	24 from line 33.	This is th	e amour	nt you	overpai	d.		34		(
	35a	Amount of line 34 you want refun	ded to y	ou. If Form 8888							35a		(
Direct deposit?	b	Routing number X X X X				ю:			_ Savi	ngs			
See instructions.	d	Account number X X X X											
	е	If you want your refund check ma											
		enter it here.					1						
	36	Amount of line 34 you want applie	εα το γοι	ur 2025 estimat	ed tax		36			0			
Amount	37	Subtract line 33 from line 24. This		-									
You Owe		For details on how to pay, go to w	_	ov/Payments or	see instru	ictions .				•	37		(
	38	Estimated tax penalty (see instruc					38						7
Third	•	ou want to allow another person to o	discuss t			ee instru	ctions				ete bel	ow. ∟	No
Party Designee	Desig			Phone					sonal ic		cation [	$\overline{}$	$\overline{}$
Designee		penalties of perjury, I declare that I have they are true, correct, and complete. De						l stateme		to the			
Sign			olaration			,		ii ii ii Oi ii ia	1		•	ent you ar	•
Here	Your	signature		Date	Your occ	cupation						PIN, enter	•
пеге	03/13/2025 STUDENT						(see	r					
İ	Phone	e no.		Email address						-			
Paid			Preparer	's signature			Date		PTI	N		Check if:	
												Self-	employed
Preparer	Firm's	s name							Pho	one no	).		
Use Only	Firm's	s address							Firr	n's FII	N		

#### **SCHEDULE OI** (Form 1040-NR)

**Other Information** 

Attach to Form 1040-NR.

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

OMB No. 1545-0074 Attachment Sequence No. **7C** 

Your identifying number

Department of the Treasury Internal Revenue Service Answer all questions. Name shown on Form 1040-NR

SAG	ARIKA DUBBAKA				875-59-0687						
Α	Of what country or countries v	were you a citizen or nationa	al during the tax yea	ar? INDIA							
В	In what country did you claim	residence for tax purposes	s during the tax yea	ar? INDIA							
С	Have you ever applied to be a						X No				
D	Were you ever:										
1.	-					Yes	X No				
2.	A green card holder (lawful pe	rmanent resident) of the Un	ited States?			Yes	X No				
	If you answer "Yes" to (1) or (2										
Е	If you had a visa on the last		•		er your U.S.						
	immigration status on the last	day of the tax year. F1			•						
F	Have you ever changed your v	visa type (nonimmigrant stat	us) or U.S. immigra	ation status?		Yes	X No				
	If you answered "Yes," indicat	e the date and nature of the	e change:								
G	List all dates you entered and left the United States during 2024. See instructions.										
	Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,										
	check the box for Canada or	r <b>Mexico</b> and skip to item H	<u>.                                    </u>	$\square$ Canada	☐ Mexico						
	Date entered United States	Date departed United State	es	Date entered United States	s Date depa	rted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy					
	01/01/2024	06/06/2024									
	07/28/2024										
Н	Give number of days (including										
	20220	, 2023147	, and :	2024 315	··						
ı	Did you file a U.S. income tax	return for any prior year? .				Yes	X No				
	If "Yes," give the latest year ar	nd form number you filed:									
J	Are you filing a return for a tru	st?				Yes	X No				
	If "Yes," did the trust have a										
	U.S. person, or receive a cont					∐ Yes	☐ No				
K	Did you receive total compens					∐ Yes	⊠ No				
	If "Yes," did you use an altern			•		∐ Yes	□ No				
L	Income Exempt From Tax—If complete (1) through (3) below				ax treaty with	a foreign	country,				
1.					claimed the tre	aty honofi	t and the				
••	amount of exempt income in the				biairried trie tre	aty benen	t, and the				
	(a) Cou		(b) Tax treaty articl		s (d) Am	ount of exe					
	(4)	The y	(b) rax troaty artion	claimed in prior tax yea	, ,	n current ta					
	(e) Total. Enter this amount o	n Form 1040-NR, line 1k. D	o not enter it anywh	nere else on line 1							
2.	Were you subject to tax in a fo	oreign country on any of the	income shown in 1	(d) above?		☐ Yes	X No				
3.	Are you claiming treaty benefit		-			☐ Yes	X No				
	If "Yes," attach a copy of the	Competent Authority determ	nination letter to you	ur return.							
M	Check the applicable box if:										
1.	This is the first year you are m					fectively c	onnected				
	with a U.S. trade or business i						📙				
2.	You have made an election in States as effectively connecte										

8843

#### **Statement for Exempt Individuals and Individuals** With a Medical Condition

For use by alien individuals only.

OMB No. 1545-0074

Attachment Sequence No. 102

Your U.S. taxpayer identification number (TIN), if any

Department of the Treasury Internal Revenue Service Your first name and initial

Go to www.irs.gov/Form8843 for the latest information.

For the year January 1—December 31, 2024, or other tax year , 2024, and ending beginning

Last name

**SAGARIKA DUBBAKA** 875-59-0687 Fill in vour Address in the United States Address in country of residence addresses only if 1-98-1-P-38-E-P GANESH NAGAR PH 4 400 E 33RD ST you are filing this TURKAYAMJAL 2200 form by itself and RANGAREDDY CHICAGO, IL 60616 not with your U.S. INDIA 501510 tax return. Part I General Information Type of U.S. visa (for example, F, J, M, Q, etc.) and date you entered the United States: F1 08/07/2023 Current nonimmigrant status. If your status has changed, also enter date of change and previous status. See instructions. Of what country or countries were you a citizen during the tax year? INDIA What country or countries issued you a passport? INDIA Enter your passport number(s): W0570692 4a Enter the actual number of days you were present in the United States during: 2023 147 2022 0 Enter the number of days in 2024 you claim you can exclude for purposes of the substantial presence test: Part II **Teachers and Trainees** For teachers, enter the name, address, and telephone number of the academic institution where you taught in 2024: For trainees, enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2024: 2018\_\_ Enter the type of U.S. visa (J or Q) you held during: 2022 2021 2023 . If the type of visa you held during any of these years changed, attach a statement showing the new visa type and the date it was acquired. Were you exempt as a teacher, trainee, or student for any part of 2 of the preceding 6 calendar years (2018 If you checked the "Yes" box on line 8, you cannot exclude days of presence as a teacher or trainee unless you meet the Exception explained in the instructions. Students Enter the name, address, and telephone number of the academic institution you attended during 2024: ILLINOIS INSTITUTE OF TECHNOLOGY (IIT), 10 W 35 ST, GALVIN TOWER, CHICAGO, IL, 60616, 3125673680 Enter the name, address, and telephone number of the director of the academic or other specialized program you participated 10 in during 2024: ROCIO RODRIGUEZ, 10 W 35 ST, GALVIN TOWER, CHICAGO, IL, 60616, 3125673680 Enter the type of U.S. visa (F, J, M, or Q) you held during: 2018\_\_\_ 11 2019 2021 2022 2023 F1 . If the type of visa you held during any of these years changed, attach a statement showing the new visa type and the date it was acquired. 12 If you checked the "Yes" box on line 12, you must provide sufficient facts on an attached statement to establish that you do not intend to reside permanently in the United States. During 2024, did you apply for, or take other affirmative steps to apply for, lawful permanent resident status 13 in the United States or have an application pending to change your status to that of a lawful permanent If you checked the "Yes" box on line 13, explain:

Form 8843 (2024) Page **2** 

Part	V P	Professional Athletes						
15	Enter the compete	the name of the charitable sports event(s) in the United States in which you competed dure						
16	Enter t	the name(s) and employer identification number(s) of the charitable organization(s) that is:	benefited from the sports					
Dovit	Note: Yorganiz	You must attach a statement to verify that all of the net proceeds of the sports event(s) were contained on line 16.						
Part 17a	Describ	ndividuals With a Medical Condition or Medical Problem be the medical condition or medical problem that prevented you from leaving the United State structions.						
b	Enter the	he date you intended to leave the United States prior to the onset of the medical condition or a 17a:						
С	Enter th	he date you actually left the United States:						
18	Physic	Physician's Statement:						
	I certify	y that						
		Name of taxpayer						
		nable to leave the United States on the date shown on line 17b because of the medical cor oed on line 17a and there was no indication that their condition or problem was preexisting.	ndition or medical problem					
		Name of physician or other medical official						
		Physician's or other medical official's address and telephone number						
		Physician's or other medical official's signature	Date					
Sign I only i are fil	f you	Under penalties of perjury, I declare that I have examined this form and the accompanying attachments, and, to the they are true, correct, and complete.	best of my knowledge and belief					
itself not w	and		03.13.25					
returr	١.	Your signature	Date					

# sprintax

# Federal Tax Return for

SAGARIKA DUBBAKA 2024

YOUR COPY
RETAIN FOR YOUR RECORDS

## Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2024 OMB No. 1545-0074

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

For the year Ja	n. 1–C	ec. 31, 2024, or other tax year beginn	ing	, 2024,	ending	,	20	.	See separate instructions.	
Your first name	and r	middle initial	Last na	ame					tifying numbe	
							(see in		,	
SAGARIKA			DUBB				8 7	5	5 9 0 6 8	7
Home address	(numl	per and street). If you have a P.O. box	, see ins	structions.					Apt. no.	
400 E 33RD S						01.1		7.5	2200	
	oost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		1	code	
CHICAGO Foreign countr	v nam	0	Foreign	n province/state/county		IL Foreign	noetal co		616	
r oreigir counti	y Haili		i oreigi	in province/state/county		Toreign	postai ci	Jue		
Filing	T									
Status		Single			ng surviving spouse (	· · · · · ·		state	e 📙 Trus	st
Check only	lf :	you checked the QSS box, enter the c	child's na	ame if the qualifying pers	son is a child but not	your dep	endent:			
one box.								-		
Digital Assets		ny time during 2024, did you: (a) recei					r (b) sell	, exc		
	_	rwise dispose of a digital asset (or a f	inancial	interest in a digital asset	)? (See instructions.)				Yes X	
Dependents				(2) Dependent's		(4) Ch	eck the bo	ox if c	qualifies for (see in	,
(see instructions)	):	(1) First name Last name		identifying number	(3) Relationship to yo	ou Chi	ld tax cre	dit	Credit for oth dependents	
If more than fou dependents, see										
instructions and										
check here							_Ц_			
Income	1a	Total amount from Form(s) W-2, box							10	0090
Effectively	b	Household employee wages not rep		` '						
Connected	C	Tip income not reported on line 1a (s			:		. 10			
With U.S.		<ul> <li>d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)</li> <li>e Taxable dependent care benefits from Form 2441, line 26</li></ul>								
Trade or Business	e f	Employer-provided adoption benefits					. 16			
Dusilless	g	Wages from Form 8919, line 6					. 19			
Attach	h	Other earned income (see instruction					. 11			
Form(s) W-2, 1042-S,	i	Reserved for future use	,							
SSA-1042-S,	j	Reserved for future use					. 1	i		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	lule OI (Form 1040-NR), i	tem L,					
here. Also		line 1(e)			1k		0			
attach Form(s)	Z	Add lines 1a through 1h	· ·				. 12	z	10	090
1099-R if	2a	Tax-exempt interest 2a			able interest		. 2h	-		
tax was withheld.	3a	Qualified dividends 3a			linary dividends .		. 3k			0
If you did not	4a	IRA distributions 4a  Pensions and annuities 5a		<b>D</b> Tas	able amount					
get a Form	5a	Reserved for future use								0
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu						_		0
instructions.	8	Additional income from Schedule 1 (	•		•		_	-		0
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively c	onnected income		. 9		10	090
	10	Adjustments to income from Schedu	ule 1 (Fo	orm 1040), line 26. These	e are your <b>total adju</b>	stments	to			
		income					. 10	)		0
	11	Subtract line 10 from line 9. This is y	our <b>adj</b> u	usted gross income			. 1	1	10	090
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard									
	deduction (see instructions) . Ştandard Deduction Allowed Under U.S India Income Tax Treaty						. 12	2	14	1600
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts or	•	,			40			
	С 14							$\neg$	4,	1600
	15	Subtract line 14 from line 11. If zero					_	$\neg$	14	<u>0004</u> 0
		2010		U io your tu						

Form 1040-NR (2	2024)										Page <b>2</b>
Tax and	16	Tax (see instructions). Chec	k if any from For	m(s): <b>1</b> 88	314 <b>2</b> [	4972	2 3	<u> </u>		16	0
Credits	17	Amount from Schedule 2 (	Form 1040), line	3						17	0
	18	Add lines 16 and 17								18	0
	19	Child tax credit or credit for	or other depende	ents from Sched	ule 8812 (Fo	orm 104	10) .			19	0
	20	Amount from Schedule 3 (	Form 1040), line	8						20	0
	21	Add lines 19 and 20								21	0
	22	Subtract line 21 from line 1	8. If zero or less	s, enter -0						22	0
	23a	Tax on income not effective	ely connected w	ith a U.S. trade	or business	from					
		Schedule NEC (Form 1040	-NR), line 15 .				23a		(		
	b	Other taxes, including self	. ,	•	•	, · ·				1	
		line 21				1	23b				
	C	Transportation tax (see ins	,				23c		(		
	d	Add lines 23a through 23c								23d	0
	24	Add lines 22 and 23d. This		x						24	0
Payments	25	Federal income tax withhe					05-				
	a	Form(s) W-2					25a		(		
	b	Form(s) 1099 Other forms (see instruction					25b 25c		(	)	
	c d	Add lines 25a through 25c	,							25d	
	e	Form(s) 8805								25e	0
	f	Form(s) 8288-A								25f	0
	g g	Form(s) 1042-S								25g	0
	26	2024 estimated tax payme								26	0
	27	Reserved for future use .				1	27				
	28	Additional child tax credit					28		(		
	29	Credit for amount paid with		•			29	7	(		
	30	Reserved for future use .					30				
	31	Amount from Schedule 3 (	Form 1040), line	15			31		(		
	32	Add lines 28, 29, and 31. T	hese are your <b>to</b>	otal other paym	ents and re	efunda	ble cr	edits .		32	0
	33	Add lines 25d, 25e, 25f, 25	ig, 26, and 32. T	hese are your <b>to</b>	tal paymer	nts .				33	0
Refund	34	If line 33 is more than line	24, subtract line	24 from line 33.	This is the	amoun	t you o	overpaid		34	0
	35a	Amount of line 34 you wan								35a	0
Direct deposit?	b	Routing number X X						ing $\square$	Savings		
See instructions.	d	Account number X X									
	е	If you want your refund ch	eck mailed to ar	address outsic	le the Unite	d State	s not	shown or	page 1,		
		enter it here.									
	36	Amount of line 34 you wan					36		(	)	
Amount	37	Subtract line 33 from line 2 For details on how to pay,		•		tione				27	0
You Owe	38	Estimated tax penalty (see				.	38			37	0
Third		u want to allow another per				inetru			es. Comp	olete he	low. No
Party	Desig		son to discuss ti	Phone		ilistiuc	,tioris.		nal identi		iowito
Designee	name	liee S		no.					er (PIN)	lication	
	Under	penalties of perjury, I declare the		d this return and a				statement	s, and to t		
Sign		signature		Date	Your occu						ent you an Identity
Here	Tours	Signature		Date	10010000	Pation					PIN, enter it here
. 1010				03/13/2025	STUDENT	Γ				e inst.)	
	Phone			Email address					_		
Paid	Prepa	rer's name	Preparer'	's signature			Date		PTIN		Check if:
Preparer											Self-employed
Use Only	Firm's	name							Phone		
July Cilly	Eirm's	addroop							Eirm'o E	INI	

#### **SCHEDULE OI** (Form 1040-NR)

**Other Information** 

Attach to Form 1040-NR.

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

OMB No. 1545-0074 Attachment Sequence No. **7C** 

Department of the Treasury Internal Revenue Service

	shown on Form 1040-NR				Your identifying number			
	GARIKA DUBBAKA			_	875-59-0687			
A	Of what country or countries v	vere you a citizen or national	during the tax y	/ear? INDIA				
B C	In what country did you claim residence for tax purposes during the tax year? INDIA  Have you ever applied to be a green card holder (lawful permanent resident) of the United States?							
D	Were you ever:							
_	A U.S. citizen?							
	A green card holder (lawful permanent resident) of the United States?							
_	If you answer "Yes" to (1) or (2							
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1							
F	Have you ever changed your value of the second of the seco	risa type (nonimmigrant statu:	s) or U.S. immi	gration status?	L Yes	No		
G	List all dates you entered and							
	Note: If you're a resident of C				ent intervals,			
	check the box for Canada or	Mexico and skip to item H		Canada	Mexico			
	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy		Date entered United State mm/dd/yy	Date departed United S mm/dd/yy	tates		
	01/01/2024	06/06/2024		min, dd, yy	mm/dd/yy			
	07/28/2024	00/00/2021						
	01720/2024							
Н	Give number of days (including 2022 0				=			
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?			Yes	No		
J	Are you filing a return for a true	st?...........			Yes	<b>No</b>		
	If "Yes," did the trust have a U.S. person, or receive a cont					□No		
K	Did you receive total compens					□ No		
	If "Yes," did you use an altern					No		
L	Income Exempt From Tax—If complete (1) through (3) below				ax treaty with a foreign co	ountry,		
1	<ul> <li>Enter the name of the country, amount of exempt income in the</li> </ul>				claimed the treaty benefit, a	ind the		
	<b>(a)</b> Cou	ntry	(b) Tax treaty ar	ticle (c) Number of month claimed in prior tax ye				
	(e) Total. Enter this amount o		-			7		
	. Were you subject to tax in a fo					No No		
3	<ul> <li>Are you claiming treaty benefit</li> <li>If "Yes," attach a copy of the 0</li> </ul>				LIYes D	No		
м	Check the applicable box if:	Jompeterit Authority determin	iation letter to	your return.				
	. This is the first year you are m	aking an election to treat inco	ome from real p	roperty located in the Unite	d States as effectively conr	nected		
	with a U.S. trade or business u					. 🗆		
2	<ul> <li>You have made an election in States as effectively connecte</li> </ul>							

Form **8843** 

## Statement for Exempt Individuals and Individuals With a Medical Condition

For use by alien individuals only.

OMB No. 1545-0074

Attachment Sequence No. **102** 

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8843 for the latest information. For the year January 1—December 31, 2024, or other tax year

beginning , 2024, and ending , 20 Your first name and initial Last name Your U.S. taxpayer identification number (TIN), if any **SAGARIKA DUBBAKA** 875-59-0687 Address in the United States Fill in warm

you aı form l	sses only if re filing this by itself and ith your U.S.	1-98-1-P-38-E-P GA TURKAYAMJAL RANGAREDDY INDIA 501510	, NESH NAGAR PH 4	1	400 E 33RD ST 2200 CHICAGO, IL 606			
Part		al Information						
		visa (for example, F, J, M						
b	F1	mmigrant status. If your s						
2	Of what coul	ntry or countries were you	ua citizen during the ta	x year? [N[	DIA			
3a	What country	y or countries issued you	a passport? INDIA					
b		assport number(s): W0						
4a		tual number of days you v	·	ted States o	during:			
	2024 <u>315</u>	2023 <u>147</u>	2022 0				245	
b Part		mber of days in 2024 you ers and Trainees	claim you can exclude	for purpos	es of the substantial	presence test:	315	
Fart 5		s, enter the name, address	and tolonhone number	or of the acc	adomio institution w	horo vou taught i	n 2024:	
3	roi teachers					_		
6	For trainees.	enter the name, address	and telephone number	er of the dire		ic or other specia		
						· ·		-
7	Enter the typ	be of U.S. visa (J or Q) you			201	9		
	2020	2021	2022	2023_		e of visa you held	I during an	У
	-	rs changed, attach a state	_			-		
8	•	cempt as a teacher, traine				• •		
	•	3)?					_ Yes	∐ No
		ed the "Yes" box on line		days of pr	esence as a teache	r or trainee unless	S	
Part		e Exception explained in t	ne instructions.					
9		me, address, and telepho	ne number of the acad	emic institu	tion you attended d	uring 2024:		
3		NSTITUTE OF TECHNO					16 31256	373680
	illinoio ii	TOTTIOTE OF TEORIES	02001 (111), 10 11 0	001,074	zviiv i Ovvizivi, Oi i	10/100, 12, 000	, 01200	27.0000
10	Enter the na	me, address, and telepho	ne number of the direc	ctor of the a	cademic or other s	oecialized progra	m vou part	ticipated
		24: ROCIO RODRIG						
11		be of U.S. visa (F, J, M, or	Q) you held during:	2018_	201			
	2020	2021	2022		F1 . If the typ		during an	У
		rs changed, attach a state						DZI
12		empt as a teacher, trained			-		☐ Yes	X No
		ked the "Yes" box on lin				hed statement to	)	
40		at you do not intend to res	,					
13		, did you apply for, or tak d States or have an app						
		ne United States?						X No
14	If you checke	ed the "Yes" box on line 1	3, explain:				00	
•								

Form 8843 (2024) Page **2** 

Part	IV Professional Athletes	
15	Enter the name of the charitable sports event(s) in the United States in which you competed competition:	-
16	Enter the name(s) and employer identification number(s) of the charitable organization(s) the event(s):	at benefited from the sports
	Note: You must attach a statement to verify that all of the net proceeds of the sports event(s) were organization(s) listed on line 16.	
Part	V Individuals With a Medical Condition or Medical Problem	
17a	Describe the medical condition or medical problem that prevented you from leaving the United St See instructions.	
b	Enter the date you intended to leave the United States prior to the onset of the medical condition on line 17a:	
С	Enter the date you actually left the United States:	
18	Physician's Statement:	
	I certify that	
	Name of taxpayer	
	was unable to leave the United States on the date shown on line 17b because of the medical described on line 17a and there was no indication that their condition or problem was preexisting.	
	Name of physician or other medical official	
	Physician's or other medical official's address and telephone number	
	Physician's or other medical official's signature	Date
Sign I only i are fil this fo	f you they are true, correct, and complete.	the best of my knowledge and belief,
itself not w	and	03.13.25
return		Date
		- 0040

# Standard Deduction Worksheet for Students and Business Apprentices From India

Attachment to Form 1040-NR, Line 12

Ent	er thi	s amount on Form 1040-NR, line 12 as your standard deduction under U.S Ir	ndia tax treaty
NA	ME:	SAGARIKA DUBBAKA	
SS	N:	875-59-0687	
1.	Enter	the amount shown below for your filing status.	14600
	Single Qualif	or married filing separately - \$14,600 ying widow(er) - \$29,200	
2.	Can y	ou be claimed as a dependent on someone else's U.S. income tax return?	No
	Yes. (	Inter the amount from line 1 on line 4. Skip line 3 and go to line 5 Go to line 3.	
	•	r earned income more than \$750?	
	Yes. / No. E	add \$450 to your earned income. Enter the total nter \$1,300	
4.	Enter	the smaller of line 1 or line 3.	14600
5.	If bor	n before January 2, 1960, OR blind, enter \$1,550 (\$1,950 if single).	0
	lf borr Other	n before January 2, 1960, AND blind, enter \$3,100 (\$3,900 if single). wise, enter -0-	
6.	Enter	any net disaster loss from the 2024 Form 4684, line 15.	0
_	1 E E A	land Fonds	14600
/.	Add I	ines 4, 5 and 6.	

Enter the total here and on Form 1040-NR, line 12. Print "Standard Deduction Allowed Under U.S. - India Income Tax Treaty" in the space to the left of these lines. This is your standard deduction for 2024.



# Taxes? Sorted.