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

IIILEIIIAI I	levelide Service					
Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social secur	ity num	ber		
JASI	WANTH REDDY BAGGARI	718-57-5995				
Spouse's		Spouse's so	cial sec	urity nu	ımber	
Part	•	year you	are au	thoriz	<u>zing.)</u>	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 1	1	26	666
1 2	Adjusted gross income		2			666. 319.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			
4	Amount you want refunded to you		4			159. 840.
5	Amount you owe		5			040.
Part		eep a cor		/our i	returi	n)
my knoreturn (ato send for any Agent to paymer authorize paymer business taxes to personal Electroreturn (ato send for any Agent to paymer business taxes to personal Electroreturn (ato send for any known (ato send for any	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisedays prior to the payment (settlement) date. I also authorize the financial institutions involved in the particle confidential information necessary to answer inquiries and resolve issues related to the particle confidential information necessary to answer inquiries and resolve issues related to the particle withdrawal Consent. I wer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate in 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.	I am now au e are the am tter, or electrotion of the S. Treasury a cated in the the authorizatests must be processing ayment. I furn now authorizatests must be processing and authorizatest must be processed as a furnity and a furnity are a furnity and	thorizing and its can be received at the entry action. The received at the entry action are received at the entry action. The entry action are received at the entry action are received at the entry action are received at the entry action.	g, and from the turn or ssion, designation to this To revolved notectron cknowlend, if a digits, er all ze theck t	I to the he incoriginato (b) the lated F on software of later hic payred to but eros	best of ome tax or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the ble, my as my
	if you are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Your s	gnature ▶ Date ▶					
Spous	e's PIN: check one box only					
	I authorize to enter or generate it	my PIN				as my
	ERO firm name		nter five			
	signature on the income tax return (original or amended) I am now authorizing.		on't ente			
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.		_			_
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2	2 7	1
		Don't en	ter all z			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of In	itting this ret	urn in a	accord	lanće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

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

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning			ning, 2023, ending, 20			0	See separate instructions.		
Your first name and middle initial		Last name Y			Your identifying number				
			(s				(see instructions)		
JASHWANTH REDDY				ARI			718-57-5995		
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
1984 HAST	ING	S DR							
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code	
KENT						OH	4	4240	
Foreign country	/ nam	е	Foreign	n province/state/county		Foreign po	ostal code		
Filing		Single	aratelv (N	MFS) Qualifvii	ng surviving spouse ((OSS)	☐ Estate	e 🗌 Trust	
Status		you checked the QSS box, enter the				,			
Check only		, ,							
one box.			. ,			. ,			
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a					(b) sell, exc		
Dependents	+	·····						qualifies for (see inst.):	
(see instructions)				(2) Dependent's		Child	tax credit	Credit for other	
(0000 0000)		(1) First name Last name		identifying number	(3) Relationship to you	, OI III G	- Lax Credit	dependents	
If more than four							<u> </u>		
dependents, see	1						<u> </u>	<u> </u>	
instructions and							<u> </u>		
check here		T. I		\				20.166	
Income	1a	Total amount from Form(s) W-2, box	•	•			1a	29,166.	
Effectively	b	Household employee wages not rep		. ,			1b		
Connected	C	Tip income not reported on line 1a (*			1c		
With U.S.	d	Medicaid waiver payments not repo		` ,	,		1d		
Trade or	e	Taxable dependent care benefits fro		·			1e		
Business	f	Employer-provided adoption benefit		•			1f		
Attach	g h	Wages from Form 8919, line 6 Other earned income (see instruction)					1g 1h		
Form(s) W-2,	i	Reserved for future use					111		
1042-S, SSA-1042-S,	i	Reserved for future use					1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			tem I		.,		
and 8288-A here. Also	ĸ	line 1(e)		,	1k				
attach	z	Add lines 1a through 1h					1z	29,166.	
Form(s)	2a	Tax-exempt interest 2a	1	1	cable interest		2b		
1099-R if tax was	3a	Qualified dividends 3a	_		dinary dividends		3b		
withheld.	4a	IRA distributions			able amount		4b		
If you did not	5a	Pensions and annuities 5a	а	b Tax	able amount		5b		
get a Form W-2, see	6	Reserved for future use	6						
instructions.	7	Capital gain or (loss). Attach Schedu	7						
	8	Additional income from Schedule 1	8						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively c	onnected income .		9	29,166.	
	10	Adjustments to income from Schedincome	10	2,500.					
	11	Subtract line 10 from line 9. This is y					11	26,666.	
	12	Itemized deductions (from Schedu					d L		
		deduction (see instructions)						13,850.	
	13a	Qualified business income deductio	n from F	orm 8995 or Form 8995-	-A . 13a				
	b	Exemptions for estates and trusts o	nly (see i	instructions)	13b				
	С	Add lines 13a and 13b					13c		
	14							13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	12,816.	

Form 1040-NR (2023)								Page ∠
Tax and	16	Tax (see instructions). Check if ar	y from For	m(s): 1 88	314 2 497	2 3 🗌		16	1,319.
Credits	17	Amount from Schedule 2 (Form 1040), line 3							0.
	18	Add lines 16 and 17						18	1,319.
	19	Child tax credit or credit for other						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							1,319.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a			
	b	Other taxes, including self-empl	oyment ta	x, from Schedul	e 2 (Form 1040),				
		line 21				23b		4	
	С	Transportation tax (see instruction				23c			
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is you		x	<u></u>	<u> </u>		24	1,319.
Payments Payments	25	Federal income tax withheld from							
	а	Form(s) W-2				25a	4,159.		
	b	Form(s) 1099				25b		4	
	С	Other forms (see instructions) .				25c			4 4 5 0
	d	Add lines 25a through 25c						25d	4,159.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments ar		• •		1		26	
	27	Reserved for future use				27		-	
	28	Additional child tax credit from S		•	,	28		-	
	29	Credit for amount paid with Forr				29			
	30	Reserved for future use				30		-	
	31	Amount from Schedule 3 (Form	,.			31		-	
	32	Add lines 28, 29, and 31. These	32	4 150					
Defend	33 34	Add lines 25d, 25e, 25f, 25g, 26						33	4,159.
Refund		If line 33 is more than line 24, su				•		35a	2,840.
Direct deposit?	35a								2,840.
See instructions.	d								
		Account number 8 1 7 7 0 1 6 1 5							
	е								
	36	Amount of line 34 you want app				36		1	
Amount	37	Subtract line 33 from line 24. Th							
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instru	ictions) .			38			
Third	Do yo	ou want to allow another person to	discuss t	his return with th	ne IRS? See instruc	ctions.	Yes. Comp	lete be	low. 🗵 No
Party	Desig	signee's Phone Personal identifi						ication	
Designee	name	·							
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								
Sign	Your signature			Date Your occupation					ent you an Identity
Here									PIN, enter it here
-	D'			Frank and t	SOFTWARE E	NGINEER	(see	inst.)	
	Phone		Droporor ²	Email address		Data	DTINI		Chapte if:
Paid		arer's name		's signature	OTTOMA MATTER	Date	PTIN	2002	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		IIYA KAM SAGAI	R GUPTA TALLAM	02/09/202			Self-employed
Use Only		s name GLOBAL TAXES			T 00016		Phone n		78)965-9522
	⊢ırm's	s address 245 ROONEY C	"I E BR	RUNSWICK N	J 08816		Firm's E	IIN 8	4-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

JASHWANTH REDDY BAGGARI

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

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

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

Your social security number 718-57-5995

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
į	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	_	
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
	Section 951(a) inclusion (see instructions)	8n	_	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or		-	
-	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente 1040, 1040-SR, or 1040-NR, line 8	r here and on Form		

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

Par	t II Adjustments to Income		
11	Educator expenses	. 11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	. 12	
13	Health savings account deduction. Attach Form 8889	. 13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	. 14	
15	Deductible part of self-employment tax. Attach Schedule SE	. 15	
16	Self-employed SEP, SIMPLE, and qualified plans	. 16	
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings	. 18	
19a	Alimony paid	. 19a	ı
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	. 20	
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
_	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans	_	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
	,		
ı	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect		
	tax law violations		
	Housing deduction from Form 2555		
ј k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
N.	1041)		
z	Other adjustments. List type and amount:		
_	0.4-		
25	Total other adjustments. Add lines 24a through 24z	. 25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10		2,500.
	, , , , , , , , , , , , , , , , , , , ,		

REV 02/05/24 PRO

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

Your identifying number

JASHWANTH REDDY BAGGARI 718-57-5995 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

Internal Revenue Service

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name sh	ame shown on Form 1040-NR Your identifying number								
JASH	WANTH REDDY BAGGARI	718-57-59	995						
Α	Of what country or countries were you a citizen or national during the tax year? INDIA								
В	In what country did you claim residence for tax purposes during the tax year? United States								
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?								
D	Were you ever:								
1.	A U.S. citizen?								
2.	A green card holder (lawful permanent resident) of the United States?								
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.								
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 same of the sa		o obongo.	gration status?		☐ Yes	⊠ No		
G	List all dates you entered and	left the United States during							
	Note: If you're a resident of C				en <u>t</u> intervals,				
	check the box for Canada or	Mexico and skip to item H	<u> </u>	\square Canada	Mexico				
	Date entered United States	Date departed United State	es	Date entered United State			d States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy			
Н	Give number of days (including 2021	, 2022	, an	d 2023 365	·	_			
ı	Did you file a U.S. income tax					⊠ Yes	☐ No		
_	If "Yes," give the latest year ar						.		
J	Are you filing a return for a trust If "Yes," did the trust have a U.S. person, or receive a conti	J.S. or foreign owner unde	r the grantor trus	t rules, make a distribution	or loan to a	∐ Yes	⊠ No		
K	Did you receive total compens					☐ Yes	□ No ⊠ No		
K	If "Yes," did you use an alterna		-			Yes	□ No		
L	Income Exempt From Tax—If								
-	complete (1) through (3) below				tax troaty with	a loloigi	oouniny,		
1.	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.								
	(a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years								
	/\=	E 1010 115 11 11 = 1							
_	(e) Total. Enter this amount of		-						
	Were you subject to tax in a fo					∐ Yes	∐ No ⊠ No		
3.	Are you claiming treaty benefit		-			∐ Yes	⊠ No		
N/I	If "Yes," attach a copy of the C	Joinpetent Authority detern	ilination letter to y	rour return.					
M 1.	Check the applicable box if: This is the first year you are m with a U.S. trade or business u								
0	You have made an election in	` ,							
2.	States as effectively connected								