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

Submiss	ion Identification Number (SID)			
Taxpayer's	name		Social securi	ty number
SHRUT	'IKA RUDRAWAR		762-87	-3213
Spouse's r	ame		Spouse's soo	cial security number
Part I	Tax Return Information — Tax Year Ending	December 31, 202	 23 (Enter year you a	are authorizing.)
Enter wh	nole dollars only on lines 1 through 5.	•		
Note: Fo	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, a	nd 5 blank.		
1 A	djusted gross income			1 79,950.
2 T	otal tax			2 9,855.
3 F	ederal income tax withheld from Form(s) W-2 and Form	(s) 1099		3 13,122.
	,			4 3,267.
	mount you owe			5
Part II	Taxpayer Declaration and Signature Autho	rization (Be sure you	get and keep a cop	y of your return)
return (orito send in for any de Agent to payment authorizat payment, business taxes to personal	ledge and belief, it is true, correct, and complete. I further or ginal or amended) I am now authorizing. I consent to allow may return to the IRS and to receive from the IRS (a) an acknowled in processing the return or refund, and (c) the date of amount itiate an ACH electronic funds withdrawal (direct debit) entroof my federal taxes owed on this return and/or a payment of the control in the interval of the interval in the in	ny intermediate service proviously intermediate service proviously refund. If applicable, I authy to the financial institution a sestimated tax, and the financial. Treasury Financial Agent ta. 3-353-4537. Payment cancet the financial institutions involves and resolve issues related.	der, transmitter, or electrison for rejection of the transcription of the transcription of the U.S. Treasury account indicated in the transcription to debit the or terminate the authorizal ellation requests must be old to the payment. I fur	onic return originator (ERC ransmission, (b) the reason of its designated Financia ax preparation software for entry to this account. This ation. To revoke (cancel) to received no later than of the electronic payment of the racknowledge that the
	er's PIN: check one box only			
	lauthorize GLOBAL TAXES LLC	to enter or	generate my PIN 7	3 2 1 3 as my
<u> </u>	ERO firm name signature on the income tax return (original or amende		· En	ter five digits, but n't enter all zeros
	I will enter my PIN as my signature on the income tax if you are entering your own PIN and your return is fil below.			
Your sig	nature ►		Date ►	
C	DIN sheet one have only			
Spouse	s PIN: check one box only	to anton on	man awata way DINI	T
	l authorize ERO firm name	to enter or	generate my PIN	ter five digits, but
	signature on the income tax return (original or amende	ed) I am now authorizing.		n't enter all zeros
	I will enter my PIN as my signature on the income tax if you are entering your own PIN and your return is fil below.	return (original or amend		
Spouse's	s signature ▶		Date ▶	
	Practitioner PIN Method	Returns Only—contin	ue below	
Part III	Certification and Authentication — Practiti	oner PIN Method Only	1	
ERO's E	FIN/PIN. Enter your six-digit EFIN followed by your five	e-digit self-selected PIN.	2 2 2 4 9 Don't ent	6 0 8 2 7 1 ter all zeros
authorized	nat the above numeric entry is my PIN, which is my signatur d to file for tax year indicated above for the taxpayer(s) indi- ents of the Practitioner PIN method and Pub. 1345 , Handbook	cated above. I confirm that	I am submitting this retu	urn in accordance with the
ERO's si	ignature ▶		Date ▶	
	<u> </u>	is Form – See Instru		

Don't Submit This Form to the IRS Unless Requested To Do So

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

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

For the year Jan	ı. 1–C	Dec. 31, 2023, or other tax year begin	ning	, 2023	, ending		,	20		See separa		
Your first name and middle initial									Your identifying number			
										(see instructions)		
SHRUTIKA			RUDE	RAWAR				76	2-8	7-3213		
Home address (num	ber and street). If you have a P.O. bo	x, see ins	structions.						Apt. no.		
3333 BROA												
City, town, or po	ost o	ffice. If you have a foreign address, a	lso comp	olete spaces below.			State			P code		
NEW YORK			1				NY			0031		
Foreign country	nam	ie .	Foreig	n province/state/county			Foreign	postal	code			
Filing Status	X	Single	arately (l	MFS) Qualify	ing survivi	ng spouse (QSS)		Estate	e 🗌 Tru	ust	
	lf	you checked the QSS box, enter the	child's n	ame if the qualifying per	son is a cl	hild but not	your dep	enden [.]	t:			
Check only one box.												
	Δta	ny time during 2023, did you: (a) rece	eive (as a	reward award or navn	ent for pr	onerty or se	rvices). c	r (h) se	عاا وير	hange or		
Digital Assets		erwise dispose of a digital asset (or a									No	
Dependents							(4) Ch	eck the	box if	qualifies for (see	inst.):	
(see instructions):	1	40.5		(2) Dependent's identifying number	(a) D		Chi	ild tax c		Credit for ot	ther	
		(1) First name Last name)	identifying number	(3) Rela	tionship to yo	u			dependent	ts	
If more than four												
dependents, see												
instructions and check here												
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see	instructions)					1a	93,17	71.	
Effectively	b	Household employee wages not re	•	,					1b			
Connected	С	Tip income not reported on line 1a	'	` ,					1c			
With U.S.	d	Medicaid waiver payments not repo	orted on						1d			
Trade or	е	Taxable dependent care benefits fr	om Form	2441, line 26					1e			
Business	f	Employer-provided adoption benef	its from F	Form 8839, line 29 .					1f			
Attack	g	Wages from Form 8919, line 6 .							1g			
Attach Form(s) W-2,	h	Other earned income (see instruction	ons) .		,				1h			
1042-S,	i	Reserved for future use				1i						
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1				1j			
and 8288-A	k	Total income exempt by a treaty fro			item L,							
here. Also attach	_	line 1(e)			L	1k			4_	02 15	71	
Form(s)	Z 20	Add lines 1a through 1h Tax-exempt interest 2	1		 xable inte				1z 2b	93,1	/ L •	
1099-R if	2a 3a		a		dinary divi			_	3b			
tax was withheld.	4a		a		•				4b			
If you did not	5a		_									
get a Form	6			6								
W-2, see instructions.	7	Capital gain or (loss). Attach Scheo	ule D (Fo	orm 1040) if required. If r	not require	d, check he	re		7			
motraotiono.	8	Additional income from Schedule 1 (Form 1040), line 10								-13,22	21.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	s your total effectively	connected	d income .			9	79 , 95	50.	
	10		and annuities 5a									
	11							-		79,9!	Ist No inst.): 71.	
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)									13,85	50.	
	13a	Qualified business income deduction			1	13a			12			
	b	Exemptions for estates and trusts of				13b						
	c	Add lines 13a and 13b			_				13c			
	14								14	13,85	50.	
,	15	Subtract line 1/1 from line 11. If zero	or loce	enter -0- This is your to	vabla ina	ome			15	66 10		

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	314 2 [497	2 3			16	9,855.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	9,855.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (F	orm 10	40) .			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 z	22	9,855.							
	23a	Tax on income not effectively co									
		Schedule NEC (Form 1040-NR),									
	b	Other taxes, including self-empl	oyment ta	x, from Schedul	e 2 (Form 1	040),					
		line 21					23b				
	С	Transportation tax (see instruction	ons)				23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is you	ur total ta	x						24	9,855.
Payments	25	Federal income tax withheld from	m:								
	а	Form(s) W-2					25a	1	3,122.		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions) .					25c				
	d	d Add lines 25a through 25c									13,122.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments ar								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									
	31	Amount from Schedule 3 (Form 1040), line 15									
	32	Add lines 28, 29, and 31. These								32	
	33	Add lines 25d, 25e, 25f, 25g, 26,								33	13,122.
Refund	34	If line 33 is more than line 24, su					•	-		34 35a	3,267.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here									3,267.
Direct deposit? See instructions.	b	Routing number 0 2 6 0 1 3 6 7 3 c Type: X Checking Savings									
	d	Account number 4 4 0 9 4 2 1 2 6 3									
	е										
	00	enter it here.								-	
A	36 37	Amount of line 34 you want app Subtract line 33 from line 24. The				•	36				
Amount You Owe	31			-		tions				37	
rou Owe	38	For details on how to pay, go to www.irs.gov/Payments or see instructions									
Third		ou want to allow another person to							es. Compl	ete he	low. 🗵 No
Party	Design	·	discuss t	Phone		, mou ac	Juono.		nal identifi		iow. 🖭 110
Designee	name			no.					er (PIN)	Callon	
	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			2001010111		Your occu	,	on an	mormatic			ent you an Identity
Here	Tours	signature		Date	Tour occi	араноп					PIN, enter it here
11616				FINANCIAL ANALYST					inst.)	,	
	Phone	e no.		Email address							
Paid		rer's name	Preparer	's signature			Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	IYA RAM SAGAH	R GUPTA T	ALLAM	02/22	2/2024	P02082	2703	Self-employed
Preparer		s name GLOBAL TAXES						Phone n		78) 965-9522	
Use Only	Firm's	s address 245 ROONEY C		RUNSWICK N	J 08816				Firm's E		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

SHRUTIKA RUDRAWAR

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 762-87-3213

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-13,221.
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		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
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 (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	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	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter		9	
10	1040, 1040-SR, or 1040-NR, line 8	HEIE AND ON FUIII	10	-13,221.
	10.0, 10.0 011, 01.10.10.1111, 1111.00		10	1 ,

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 governr	nent		
	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		9a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use	_	22	
23	Archer MSA deduction	🔯	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I 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 24g			
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
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	:	26	

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

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

Name shown on Form 1040-NR Your identifying number SHRUTIKA RUDRAWAR 762-87-3213 Enter amount of income under the appropriate rate of tax. See instructions.

Notice of the control					(a) 10%	# > 450/	4.3.000/	(d) Other (specify)			
		Nature of Income				(b) 15%	(c) 30%	%	%		
1	Dividends and dividend e	quivalents:									
а	Dividends paid by U.S. co	orporations		1a							
b	Dividends paid by foreign	corporations		1b							
С	Dividend equivalent payme	ents received with respect to section 871(m) tra	ansactions	1c							
2	Interest:										
а	Mortgage			2a							
b	Paid by foreign corporation	ons		2b							
С	Other			2c							
3	Industrial royalties (patent	ts, trademarks, etc.)		3							
4	Motion picture or TV copy	yright royalties		4							
5	Other royalties (copyright	s, recording, publishing, etc.)		5							
6	Real property income and	d natural resources royalties		6							
7	Pensions and annuities .			7							
8	Social security benefits .			8							
9		below		9							
10	Gambling—Residents of (If zero or less, enter -0	Canada only. Enter net income in column (c).									
а	Winnings										
b	Losses	<u> </u>		10c							
11	Gambling—Residents of one Note: Enter winnings only	11									
12	Other (specify):										
				12							
13	•	n columns (a) through (d)		13							
14		of tax at top of each column		14							
_15	Tax on income not effecti	ively connected with a U.S. trade or business						-NR, line 23a 15			
		Capital Gains and	Losses F	rom	Sales or Excha	inges of Proper	ty				
losses i	nly the capital gains and from property sales or ges that are from sources the United States and not	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).		
effective busines	rely connected with a U.S. ss. Do not include a gain on disposing of a U.S. real										
propert	ty interest; report these nd losses on Schedule D										
	property sales or										
connec	ges that are effectively ted with a U.S. business	Add columns (f) and (g) of line 16					17	()			
		Capital gain. Combine columns (f) and (g									

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR Your identifying number 762-87-3213 SHRUTIKA RUDRAWAR 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: ⊠ No 1. A U.S. citizen? Yes 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: List all dates you entered and left the United States during 2023. See instructions. G 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 entered United States Date departed 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 ______365 ____, and 2023 ______365 ____. X Yes □ No ı If "Yes," give the latest year and form number you filed: 1040NR 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 Κ Yes ⊠ No If "Yes," did you use an alternative method to determine the source of this compensation? ☐ No 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 . . . 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? No 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

SCHEDULE E (Form 1040)

Department of the Treasury

Name(s) shown on return

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Your social security number

Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

SHRU	JTIKA	RUDRAW	AR									762-	-87-3213	3
Par		Income or	Loss	s From	Rental R	eal Estate ar	nd Ro	yalties						
		Note: If you a	re in th	he busines	ss of renting	personal prope	erty, use	Schedule	c . See	instru	ctions. If you	are an ir	ndividual, re	port farm
Λ						page 2, line 40.		Form(a) :	10002 6	'aa ina	tructions			/as VINa
		ou make any payments in 2023 that would require you to file Form(s) 1099? See instructions s," did you or will you file required Form(s) 1099?												es 🔼 No
										• •		• •	<u> </u>	<u>es </u>
1a	Physical address of each property (street, city, state, ZIP code)													
Α	PLO:	T NO,23 V	VENK	ATESH	ENCLAVE	,JILLELAG	UDA M	MEERPE?	Γ , BALZ	APUR	, RANGA	REDDY	IN 500	0097
В														
С														
1b		of Property	2			al estate prop				Fa	ir Rental	1	onal Use	QJV
	,	list below)	-		report the al use days					Days		Days		
A_	3		-		neet the re			A		365		0	+ $+$	
B C			-	qualifie	d joint ven	uctions	i.	В					$+$ \vdash	
	of Duo								С					
	of Prop	perty: Family Resid	donos	. 21	/acation/S	hort-Term Rer	otol	5 Lanc	1	7	Self-Rental			
		ramily Resid			Commercia		ııaı	6 Roya		-		ribo)		
	iviuiti-i	arrilly nesid	ence	4 (Commercia	ai		о поус	aities	0	Other (desc	, inde)		
											Propert	ies:		
Incon									Α		В			С
3		received .					3		7	80.				
_ 4	Royal	Ities received	d				4							
Expe							_							
5		rtising					5							
6	Auto and travel (see instructions) 6									0.0				
7		Cleaning and maintenance							8	80.				
8 9							8							
10		ance					10							
11									2,2	1 /1				
12									2,2	17.				
13	_	interest .	•			•	12							
14		irs					14		3,6	49.				
15		lies					15		4,8					
16		3					16		· ·					
17	Utilitie	es					17		2,4	58.				
18	Depre	eciation expe	ense d	or depleti	ion		18							
19	Other	(list)					19							
20	Total	expenses. A	Add Iir	nes 5 thro	ough 19 .		20		14,0	01.				
21	Subtr	act line 20 fr	rom li	ne 3 (rent	ts) and/or	4 (royalties). If								
		. ,				ut if you must			100	_				
		orm 6198 .					21		-13 , 2	21.				
22						itation, if any,	00	,	1 2 0 0		,			
00-		orm 8582 (se		-			22	(-	13,22		(780)(
23a			-			all rental propall royalty prop			•	23a		100	•	
b						all royalty prop r all properties			•	23b 23c				
c d						r all properties r all properties				23d				
u e						r all properties r all properties				23e	1 ,	4,001		
24						line 21. Do no				200	т.	. 2		
25		-				rental real esta		-		· · · nter to	tal losses he			13,221.
26		•	•			me or (loss).								
20						page 2 do no								
						, include this a						. 2	6	-13,221.