## 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 Revenue Service		
Submission Identification Number (SID) 222496202404308ck174		
Taxpayer's name	Social securit	v number
SHESHEAR PATHAPATI	511-57-	-
Spouse's name		ial security number
Part I Tax Return Information — Tax Year Ending December 31, 2023	(Enter year you a	re authorizing.)
Enter whole dollars only on lines 1 through 5.		
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		1 38,656.
<b>2</b> Total tax		<b>2</b> 2,759.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 4,022.
4 Amount you want refunded to you		4 1,263.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an		<del></del>
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Par return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasor for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accompayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellated business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related the personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	transmitter, or electron for rejection of the true the U.S. Treasury are point indicated in the team to the transmittent of th	onic return originator (ERO) ansmission, (b) the reason of its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) at received no later than 2 the electronic payment of ther acknowledge that the
Taxpayer's PIN: check one box only		
▼ I authorize GLOBAL TAXES LLC to enter or get	nerate my PIN	9 5 3 8 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	ter five digits, but n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.		
Your signature ► Da	te ▶	
Spouse's PIN: check one box only		
I authorize to enter or get	nerate my DINI	as my
ERO firm name	_	ter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.		
Spouse's signature ▶ Da	ite ▶	
Practitioner PIN Method Returns Only—continue	below	
Part III 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 Don't ente	6 0 8 2 7 1 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arrequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provided in the Practition PIN method in the PIN m	m submitting this retu	ırn in accordance with the
ERO's signature ▶ Da	ite ▶	
ERO Must Retain This Form — See Instruction		
Don't Submit This Form to the IRS Unless Requeste	d 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	ar Jan. 1-Dec. 31, 2023, or other tax year beginning, 2023, ending, 20							See separate instructions.		
Your first name	first name and middle initial Last name You						Your id	entifying number		
								see instructions)		
SHESHEAR	EAR PATHAPATI 5							-57-9538		
Home address	(numl	oer and street). If you have a P.O. box	, see ins	tructions.				Apt. no.		
3001 MCKN	IGH	T EAST DRIVE APT 328								
City, town, or po	ost of	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code		
PITTSBURG	Н					PA		15237		
Foreign country name Foreign province/state/county Foreign posta								de		
Filing Status	X	Single	☐ Es	tate 🗌 Trust						
Check only	lf :	you checked the QSS box, enter the o	hild's na	ame if the qualifying pe	rson is a child but not	your dep	endent:			
one box.										
Digital Assets	At a	ny time during 2023, did you: (a) recei	ve (as a	reward, award, or payr	nent for property or se	ervices): c	or (b) sell.	exchange, or		
Digital / toooto		erwise dispose of a digital asset (or a f								
Dependents						(4) Cł	neck the bo	x if qualifies for (see inst.):		
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(2) Polationahin to v	Ch	ild tax cred	it Credit for other		
		(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents		
If more than four										
dependents, see										
instructions and check here							$\overline{}$			
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)	1		. 1a	41,156.		
Effectively	b	Household employee wages not rep	`	,				11,100.		
Connected	c	Tip income not reported on line 1a (s		• •						
With U.S.	d	Medicaid waiver payments not report		•						
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit		•						
240000	g	Wages from Form 8919, line 6		·						
Attach	h	Other earned income (see instruction	ns) .				. 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from line 1(e)								
here. Also attach	z	Add lines 1a through 1h			· · [IK]		. 1z	41,156.		
Form(s)	2a	Tax-exempt interest 2a	1	I	axable interest		. 2b	11,1001		
1099-R if tax was		Qualified dividends 3a	_		rdinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a			axable amount					
If you did not	5a	Pensions and annuities 5a			axable amount					
get a Form	6	Reserved for future use	· .	<del></del>			. 6			
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If I	not required, check he	ere	□ 7			
	8	Additional income from Schedule 1 (	Form 10	040), line 10			. 8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively	connected income		. 9	41,156.		
	10	Adjustments to income from Schedincome	•	•	•		_	2,500.		
	11	Subtract line 10 from line 9. This is y						38,656.		
	12	Itemized deductions (from Schedu						·		
		deduction (see instructions)	,	,,			I	13,850.		
	13a	Qualified business income deduction			1 1					
	b	Exemptions for estates and trusts or	nly (see i	instructions)	13b					
	С	Add lines 13a and 13b					. 130	;		
	14									
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>t</b>	axable income .		. 15	24,806.		

Form 1040-NR (	2023)							Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814 2	. 497	'2 <b>3</b>			16	2,759.	
Credits	17	Amount from Schedule 2 (Form 1040), line 3					17	0.	
	18	Add lines 16 and 17					18	2,759.	
	19	Child tax credit or credit for other dependents from Schedule 8812	(Form 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 zero or less, enter -0					22	2 <b>,</b> 759.	
	23a	Tax on income not effectively connected with a U.S. trade or busine Schedule NEC (Form 1040-NR), line 15		23a					
	b	Other taxes, including self-employment tax, from Schedule 2 (Form	n 1040),						
		line 21		23b					
	С	Transportation tax (see instructions)		23c					
	d	Add lines 23a through 23c					23d		
-	24	Add lines 22 and 23d. This is your <b>total tax</b>					24	2,759.	
<b>Payments</b>	25	Federal income tax withheld from:							
	а	Form(s) W-2		25a		4,022.			
	b	Form(s) 1099		25b					
	С	Other forms (see instructions)		25c					
	d	Add lines 25a through 25c					25d	4,022.	
	е	Form(s) 8805					25e		
	f	Form(s) 8288-A					25f		
	g	Form(s) 1042-S					25g		
	26	2023 estimated tax payments and amount applied from 2022 return	η				26		
	27	Reserved for future use		27					
	28	Additional child tax credit from Schedule 8812 (Form 1040)		28					
	29	Credit for amount paid with Form 1040-C		29					
	30	Reserved for future use		30					
	31	Amount from Schedule 3 (Form 1040), line 15		31					
	32	Add lines 28, 29, and 31. These are your total other payments and	32						
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payn					33	4,022.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the		•	-		34	1,263.	
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attack	35a	1,263.					
Direct deposit? See instructions.	b	Routing number 1 1 1 0 0 0 6 1 4 c Ty							
See instructions.	d	Account number 7 9 2 8 3 0 0 6 6							
	е	If you want your refund check mailed to an address outside the Un	ited State	es not s	hown or	page 1,			
		enter it here.		T					
	36	Amount of line 34 you want applied to your 2024 estimated tax		36					
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .	tiana						
You Owe	00	For details on how to pay, go to www.irs.gov/Payments or see instr	uctions .				37		
	38	Estimated tax penalty (see instructions)		38		0		ow. 🗵 No	
Third	•	u want to allow another person to discuss this return with the IRS? S	ee instru	ctions.		es. Compl		ow. 🔼 No	
Party Designee	Desig		nal identifi or (DIN)	cation					
Designee	name nonumber (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and								
		they are true, correct, and complete. Declaration of preparer (other than taxpa							
Sign	Yours	signature Date Your oc	cupation			If the	RS s	ent you an Identity	
Here			·			Prot	ection	PIN, enter it here	
			R PROJI	ECT CO	ORDINA	TO   (see	inst.)		
	Phone			l D.:		DTIN			
Paid	Prepa	rer's name Preparer's signature		Date		PTIN		Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA	TALLAM	03/01	/2024	P02082		Self-employed	
Use Only		sname GLOBAL TAXES LLC				Phone n		78) 965-9522	
	Firm's	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171							

BAA

## 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

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security numbe
SHESHEAR PATHAPATI	511-57-9538
Part I Additional Income	

Par	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			
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 (		)	
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. Enter	r here	and on Form		
	1040, 1040-SR, or 1040-NR, line 8			10	

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	t	
	officials. Attach Form 2106		
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		
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	2,500.
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 24g		
h	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:		
<b>25</b>	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and or		0.500
	Form 1040, 1040-ŠR, or 1040-NR, line 10	26	2,500.

#### **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 SHESHEAR PATHAPATI 511-57-9538 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	<b>(b)</b> 15% <b>(c)</b> 30%	(c) 30%	(d) Other	ner (specify)			
			Nature of income			(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. co	rporations		1a					
b	Dividends paid by fo	reign	corporations		1b					
С	Dividend equivalent p	equivalent payments received with respect to section 871(m) transactions 1c								
2	Interest:									
а	a Mortgage									
b	b Paid by foreign corporations									
С										
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	соруі	right royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuiti	es.			7					
8	Social security benef	fits .			8					
9	Capital gain from line	e 18 b	elow		9					
10										
а	Winnings									
b	Losses				10c					
11	Gambling—Resident Note: Enter winnings	s of c	ountries other than Canada. Losses aren't allowed		11					
12										
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines	ss. Add colum	ns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040	-NR, line 23a <b>15</b>	
			Capital Gains an	d Losses F	rom	Sales or Excha	anges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		es or if necessary, attach statement of sources descriptive details not shown below		(b) Date acqu mm/dd/yy		(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).
	ely connected with a U.S. s. Do not include a gain									
or loss	on disposing of a U.S. real									
gains ar	y interest; report these nd losses on Schedule D									
(Form 1	•									
	property sales or ges that are effectively									
connect	ted with a U.S. business									
	797, or both.	18	Capital gain. Combine columns (f) and	(g) of line 17	. Ente	er the net gain her	e and on line 9 abo	ove. If a loss, ente	r-0 <b>18</b>	

#### **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

Name sl	nown on Form 1040-NR				Your identifying nu	umber				
SHES	HEAR PATHAPATI				511-57-953					
Α	Of what country or countries w	vere you a citizen or nationa	al during the tax y	ear? INDIA						
В	In what country did you claim	residence for tax purpose	s during the tax y	ear? United States						
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of the United States? .	[	☐ Yes 🗵 No				
D	Were you ever:				_					
	A U.S. citizen?									
2.										
_	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 yearF1									
F	Have you ever changed your v If you answered "Yes," indicat	e the date and nature of the	e change:		L	☑ Yes				
G	List all dates you entered and	left the United States durin	g 2023. See instri	uctions.						
	Note: If you're a resident of C									
	check the box for Canada or	-			Mexico					
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es	Date entered United State mm/dd/yy		ed United States n/dd/yy				
	Tillin dan yy	Tillin dan y y		типи аал у у		плаалуу				
Н	Give number of days (including	vacation, nonworkdays, and	d partial days) you	were present in the United	States during:					
	2021	, 2022	, an	d <b>2023</b> 365						
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.			[	☐ Yes				
J	Are you filing a return for a trus	st?			[	☐ Yes				
	If "Yes," did the trust have a U.S. person, or receive a contr				_	☐ Yes ☐ No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax yea	ar?	[	☐ Yes				
	If "Yes," did you use an alterna			•		☐ Yes ☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with a	foreign country,				
1.	Enter the name of the country, amount of exempt income in the				claimed the treat	ty benefit, and the				
	(a) Cou	ntry	(b) Tax treaty and	ticle (c) Number of montl	ns (d) Amou	int of exempt				
				claimed in prior tax ye	ars income in	current tax year				
	(e) Total. Enter this amount of	n Form 1040-NR, line 1k. D	o not enter it anv	where else on line 1						
2.	Were you subject to tax in a fo		-		[	☐ Yes ☐ No				
	Are you claiming treaty benefit				[	☐ Yes				
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to y	our return.						
M	Check the applicable box if:									
1.	This is the first year you are multiplier with a U.S. trade or business to					ctively connected				
2.	You have made an election in States as effectively connected									
For Pa	perwork Reduction Act Notice,	see the Instructions for Fo	rm 1040-NR.	RAA REV 02/22/24 PRO	Schedule OI (F	Form 1040-NR) 2023				