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	n. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20		See separate instructions.
Your first name	and i	middle initial	Last na	ame			Your id	lentif	ying number
UDAY KUMA	D		BAGA	M			`		-5762
		per and street). If you have a P.O. box					175	20	Apt. no.
1 VISTA M	•	, ,	., 0000						7 (511 1101
		ffice. If you have a foreign address, al	so comp	lete spaces below.		State		ZIP	code
SAN JOSE		,	·	·		CA		951	134
Foreign country	nam	e	Foreign	n province/state/county			postal co		
Filing Status	ı	Single			ng surviving spouse	` '		tate	☐ Trust
Check only one box.		you checked the QSS box, enter the o		ame if the qualifying per	son is a child but not	your aep	endent: 		
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					or (b) sell,		ange, or Yes X No
Dependents						(4) Ch	eck the bo	x if qua	alifies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Chi	ild tax cred	lit	Credit for other dependents
		(1) First name Last name		idonarying nambor	(b) Helationship to yo	, u			
If more than four									
dependents, see instructions and									
check here							一一		
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)			. 1a	T	119,840.
Effectively	b	Household employee wages not rep	,	,					•
Connected	С	Tip income not reported on line 1a (
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruc	tions)		. 1d		
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e		
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 1f		
	g	g Wages from Form 8919, line 6							
Attach Form(s) W-2,	h								
1042-S,	i								
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>		
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)							
attach	z	Add lines 1a through 1h					. 1z		119,840.
Form(s)	2a	Tax-exempt interest 2a	a	b Tax	kable interest		. 2b		
1099-R if tax was	За	Qualified dividends 3a	1	b Ord	dinary dividends .		. 3b		
withheld.	4a	IRA distributions 4a	1		kable amount		. 4b		
If you did not	5a	Pensions and annuities 5a	a	b Tax	kable amount		. 5b		
get a Form W-2, see	6	Reserved for future use					. 6		
instructions.	7	Capital gain or (loss). Attach Schedu	•						
	8	Additional income from Schedule 1	(Form 10	040), line 10			. 8		-14,823.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	B. This is	your total effectively of	connected income		. 9		105,017.
	10	Adjustments to income from Sched income		•	•				
	11	Subtract line 10 from line 9. This is y	our adj u	ısted gross income			. 11		105,017.
	12	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)							13,850.
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts of	nly (see i	nstructions)	13b				
	С	Add lines 13a and 13b					. 13	:	
	14	Add lines 12 and 13c					. 14		13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income .	<u>.</u>	. 15		91,167.

Form 1040-NR (2023)									Page Z
Tax and	16	Tax (see instructions). Check if ar	y from For	m(s): 1 88	2 2 497	2 ;	3 🗆		16	15 , 366.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	15,366.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Form 10-	40) .			19	
	20	Amount from Schedule 3 (Form	1040), line	8					20	7,500.
	21	Add lines 19 and 20							21	7,500.
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	7,866.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a				
	b	Other taxes, including self-emple								
	-	line 21	•		,	23b				
	С	Transportation tax (see instruction				23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is you							24	7,866.
Payments	25	Federal income tax withheld from								.,,
i ayıncınıs	a	Form(s) W-2				25a	1 '	9,922.		
	b	Form(s) 1099				25b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	c	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	19,922.
	e	Form(s) 8805							25e	13/3221
	f	Form(s) 8288-A							25f	
	g g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar							26	
	27	Reserved for future use		• •		27			20	
	28	Additional child tax credit from S				28				
	29			•		29				
		Credit for amount paid with Form								
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form	, .			31	1:4-			
	32	Add lines 28, 29, and 31. These	-						32	10.000
	33	Add lines 25d, 25e, 25f, 25g, 26,							33	19,922.
Refund	34	If line 33 is more than line 24, su				-	=		34	12,056.
	35a	Amount of line 34 you want refu							35a	12,056.
Direct deposit? See instructions.	b	Routing number 1 1 1 0			c Type:	Check	king ∐	Savings		
occ mondonone.	a	Account number 7 6 5 3					<u>. </u>			
	е	If you want your refund check menter it here.			le the United State		shown on	page 1,		
	36	Amount of line 34 you want app				36				
Amount	37	Subtract line 33 from line 24. Th	is is the ar	nount you owe						
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	ıctions) .			38				
Third	Do yo	ou want to allow another person to	discuss tl	his return with th	ne IRS? See instru	ctions.	□ Ye	es. Compl	ete bel	ow. 🛛 No
Party	Desig	nee's		Phone			Perso	nal identifi	cation	
Designee	name			no.			numbe	er (PIN)		
		penalties of perjury, I declare that I ha they are true, correct, and complete. D								
Sign		signature		Date	Your occupation				•	ent you an Identity
Here	Tour	signature		Date	Tour occupation					PIN, enter it here
11016					SENIOR FIRM	WARE	ENGINE			•
	Phone	e no.		Email address				'		
Paid	Prepa	rer's name	Preparer'	's signature		Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	IYA RAM SAGAH	R GUPTA TALLAM	02/2	6/2024	P02082	703	Self-employed
Preparer		s name GLOBAL TAXES						Phone no	o. (6	78) 965-9522
Use Only		s address 245 ROONEY C		RUNSWICK N	J 08816			Firm's El		4-3171965
		_ 10 1.001.21								

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence 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.

Internal Revenue Service		Sequence No. 01				
Name(s) shown on Fo	Name(s) shown on Form 1040, 1040-SR, or 1040-NR					
UDAY KUMAR BAG	793-26-5762					
Part I Addition	onal Income					

1 Taxable refunds, credits, or offsets of state and local income taxes 2 Alimony received	ı aı	Additional income			
b Date of original divorce or separation agreement (see instructions): 3 Business income or (loss). Attach Schedule C	1			-	
3 Business income or (loss). Attach Schedule C 4 Other gains or (losses). Attach Form 4797 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -14,823. 6 Farm income or (loss). Attach Schedule F. 7 Unemployment compensation 7 Unemployment compensation 8 Other income: a Net operating loss b Gambling c Cancellation of debt d Foreign earned income exclusion from Form 2555 d G Income from Form 8853 f Income from Form 8889 g Alaska Permanent Fund dividends b Jury duty pay i Prizes and awards j Activity not engaged in for profit income b Stock options I 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 M Olympic and Paralympic medals and USOC prize money (see instructions) n Section 951(a) inclusion (see instructions) p Section 951(a) inclusion (see instructi	2a			2a	
3 Business income or (loss). Attach Schedule C 4 Other gains or (losses). Attach Form 4797 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -14,823. 6 Farm income or (loss). Attach Schedule F. 7 Unemployment compensation 7 Unemployment compensation 8 Other income: a Net operating loss b Gambling c Cancellation of debt d Foreign earned income exclusion from Form 2555 d G Income from Form 8853 f Income from Form 8889 g Alaska Permanent Fund dividends b Jury duty pay i Prizes and awards j Activity not engaged in for profit income b Stock options I 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 M Olympic and Paralympic medals and USOC prize money (see instructions) n Section 951(a) inclusion (see instructions) p Section 951(a) inclusion (see instructi	b	Date of original divorce or separation agreement (see instructions):			
5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 6 Farm income or (loss). Attach Schedule F 7 Unemployment compensation 7 Other income: a Net operating loss	3	Business income or (loss). Attach Schedule C		3	
6 Farm income or (loss). Attach Schedule F. 7 Unemployment compensation. 8 Other income: a Net operating loss. b Gambling. c Cancellation of debt d Foreign earned income exclusion from Form 2555. e Income from Form 8853. f Income from Form 8859. g Alaska Permanent Fund dividends. h Jury duty pay. i Prizes and awards j Activity not engaged in for profit income. k Stock options. I 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. m Olympic and Paralympic medals and USOC prize money (see instructions). n Section 951(a) inclusion (see instructions) p Section 951(a) inclusion (see instructions) p Section 461() excess business loss adjustment q Taxable distributions from an ABLE account (see instructions) r Scholarship and fellowship grants not reported on Form W-2 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan u Wages earned while incarcerated c Other income. Add lines 8a through 8z Total other income. Add lines 8a through 8z	4	Other gains or (losses). Attach Form 4797		4	
7 Unemployment compensation 8 Other income: 8 Other income: 9 Net operating loss	5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-14,823.
7 Unemployment compensation 8 Other income: 8 Other income: 9 Net operating loss	6	Farm income or (loss). Attach Schedule F		6	
a Net operating loss	7	Unemployment compensation		7	
b Gambling c Cancellation of debt d Foreign earned income exclusion from Form 2555 eld () e Income from Form 8853 f Income from Form 8889 g Alaska Permanent Fund dividends b Jury duty pay i Prizes and awards j Activity not engaged in for profit income k Stock options l 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 m Olympic and Paralympic medals and USOC prize money (see instructions) n Section 951(a) inclusion (see instructions) s Section 951(a) inclusion (see instructions) s Section 951(a) inclusion (see instructions) p Section 461(f) excess business loss adjustment q Taxable distributions from an ABLE account (see instructions) r Scholarship and fellowship grants not reported on Form W-2 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan u Wages earned while incarcerated z Other income. List type and amount: 9 Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form	8	Other income:			
b Gambling c Cancellation of debt d Foreign earned income exclusion from Form 2555 eld () e Income from Form 8853 f Income from Form 8889 g Alaska Permanent Fund dividends b Jury duty pay i Prizes and awards j Activity not engaged in for profit income k Stock options l 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 m Olympic and Paralympic medals and USOC prize money (see instructions) n Section 951(a) inclusion (see instructions) s Section 951(a) inclusion (see instructions) s Section 951(a) inclusion (see instructions) p Section 461(f) excess business loss adjustment q Taxable distributions from an ABLE account (see instructions) r Scholarship and fellowship grants not reported on Form W-2 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan u Wages earned while incarcerated z Other income. List type and amount: 9 Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form	а	Net operating loss	8a ()		
c Cancellation of debt d Foreign earned income exclusion from Form 2555	b		8b		
d Foreign earned income exclusion from Form 2555	С		8c		
e Income from Form 8853	d		8d ()		
g Alaska Permanent Fund dividends	е		8e		
h Jury duty pay	f	Income from Form 8889	8f		
h Jury duty pay	g	Alaska Permanent Fund dividends	8g		
i Prizes and awards j Activity not engaged in for profit income k Stock options l 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 m Olympic and Paralympic medals and USOC prize money (see instructions) n Section 951(a) inclusion (see instructions) Section 951A(a) inclusion (see instructions) Section 461(f) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) r Scholarship and fellowship grants not reported on Form W-2 S Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Total other income. Add lines 8a through 8z Total other income. Add lines 8a through 8z Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form	h	Jury duty pay			
j Activity not engaged in for profit income	i		8i		
k Stock options	i		8i		
I 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	k				
for profit but were not in the business of renting such property	1				
m Olympic and Paralympic medals and USOC prize money (see instructions)			81		
instructions)	m				
n Section 951(a) inclusion (see instructions) o Section 951A(a) inclusion (see instructions) p Section 461(l) excess business loss adjustment q Taxable distributions from an ABLE account (see instructions) r Scholarship and fellowship grants not reported on Form W-2 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan whatevalue wages earned while incarcerated other income. List type and amount: 9 Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form			8m		
o Section 951A(a) inclusion (see instructions)	n	,	8n		
p Section 461(I) excess business loss adjustment	0	, ,			
Taxable distributions from an ABLE account (see instructions)	р		8p		
r Scholarship and fellowship grants not reported on Form W-2	a a				
s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	r				
t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	s				
a nongovernmental section 457 plan			8s ()		
a nongovernmental section 457 plan	t	Pension or annuity from a nonqualifed deferred compensation plan or			
Total other income. List type and amount: Total other income. Add lines 8a through 8z		a nongovernmental section 457 plan	8t		
Total other income. List type and amount: Total other income. Add lines 8a through 8z	u		8u		
9 Total other income. Add lines 8a through 8z	Z				
10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form			8z		
10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form	9	Total other income. Add lines 8a through 8z		9	
	10	Combine lines 1 through 7 and 9. This is your additional income. Enter	here and on Form		
				10	-14,823.

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-				
	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	
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	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	• • • • • • • • • • • • • • • • • • • •	24c			
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
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)	24h			
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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			
25	Total other adjustments. Add lines 24a through 24z	<u>.</u> .		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. Enter	here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

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.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

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

Your social security number 793-26-5762

Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required				1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, lin	e 11. 	Attach	2	
3	Education credits from Form 8863, line 19				3	
4	Retirement savings contributions credit. Attach Form 8880				4	
5a	Residential clean energy credit from Form 5695, line 15				5a	
b	Energy efficient home improvement credit from Form 5695, line 32				5b	
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a				
b	Credit for prior year minimum tax. Attach Form 8801	6b				
С	Adoption credit. Attach Form 8839	6c				
d	Credit for the elderly or disabled. Attach Schedule R	6d				
е	Reserved for future use	6e				
f	Clean vehicle credit. Attach Form 8936	6f		7 , 500.		
g	Mortgage interest credit. Attach Form 8396	6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified electric vehicle credit. Attach Form 8834	6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to holders of tax credit bonds. Attach Form 8912	6k				
ı	Amount on Form 8978, line 14. See instructions	6I				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
z	Other nonrefundable credits. List type and amount:					
		6z				
7	Total other nonrefundable credits. Add lines 6a through 6z				7	7,500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20	040,	1040-	SR, or	8	7,500.
				(cc	ntinue	ed on page 2)

Schedule 3 (Form 1040) 2023 Page **2**

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions)			10	
11	Excess social security and tier 1 RRTA tax withheld			11	
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
а	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
Z	Other payments or refundable credits. List type and amount:	13z			
14	Total other payments or refundable credits. Add lines 13a through	13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-	-	15	

SCHEDULE NEC (Form 1040-NR)

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

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

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number UDAY KUMAR BAGAM 793-26-5762 Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income		(-) 100/	/I-) 450/	(-) 000/	(d) Other	r (specify)
	Nature of Income		(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add column					-NR, line 23a 15	
	Capital Gains and Losses	From	Sales or Excha	nges of Proper	ty		
losses f	nly the capital gains and from property sales or ges that are from sources he United States and not		(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. ss. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	y interest; report these nd losses on Schedule D						
(Form 1							
exchan	property sales or ges that are effectively						
						()	
	797, or both. 18 Capital gain. Combine columns (f) and (g) of line 1	7. Ent	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 18	

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

Nam	e sł	nown on Form 1040-NR				Your identifying	number	
UD	ΑY	KUMAR BAGAM				793-26-5		
Α		Of what country or countries w	vere you a citizen or nationa	al during the tax	year? <u>INDIA</u>			
В		In what country did you claim	residence for tax purposes	s during the tax y	ear? United States			
С		Have you ever applied to be a	green card holder (lawful p	ermanent reside	nt) of the United States? .		Yes	⊠ No
D		Were you ever:						S
								⊠ No
	2.	A green card holder (lawful per	,				∐ Yes	⊠ No
Е		If you answer "Yes" to (1) or (2) If you had a visa on the last of	•	•		ator your IIS		
_		immigration status on the last of	day of the tax year. $_{\rm F1}$					
F		Have you ever changed your v If you answered "Yes," indicate	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immi e change:	gration status?		∐ Yes	⊠ No
G		List all dates you entered and I	eft the United States durin	g 2023. See instr	ructions.			
		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 State mm/dd/yy	es	Date entered United State mm/dd/yy		arted Unite nm/dd/yy	d States
		ППЛаалуу	ПП/ии/уу		IIIII/dd/yy	'	ПП/ССС/УУ	
н		Give number of days (including	vacation, nonworkdays, and	— d partial days) you	were present in the United	States during:		
		2021	=		-	_		
1		Did you file a U.S. income tax	return for any prior year?.				X Yes	☐ No
		If "Yes," give the latest year an						
J		Are you filing a return for a trus					Yes	⊠ No
		If "Yes," did the trust have a U.S. person, or receive a contr						
v							☐ Yes	□ No ⊠ No
K		Did you receive total compens If "Yes," did you use an alterna						□ No
L		Income Exempt From Tax—If			•			
		complete (1) through (3) below	. See Pub. 901 for more inf	formation on tax	treaties.	-		-
	1.	Enter the name of the country, amount of exempt income in th				claimed the tre	eaty benef	it, and the
		(a) Coul	ntry	(b) Tax treaty ar	ticle (c) Number of mont claimed in prior tax ye		ount of ex n current t	•
		(e) Total. Enter this amount or	Form 1040-NP line 11/ D	lo not optor it on	whore else on line 1			
	2	Were you subject to tax in a fo		-			Yes	□No
		Are you claiming treaty benefit						⊠ No
		If "Yes," attach a copy of the C		-			00	
М		Check the applicable box if:	, , , , , , , , , , , , , , , , , , , ,		•			
	1.	This is the first year you are may with a U.S. trade or business u	aking an election to treat in Inder section 871(d). See ir	come from real pastructions	property located in the Unit	ed States as ef	fectively c	onnected
:	2.	You have made an election in States as effectively connected	a previous year that has	not been revoke	ed, to treat income from re	eal property loc	cated in th	he United

SCHEDULE E (Form 1040)

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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

Name(s) shown on return Your social security number 793-26-5762 UDAY KUMAR BAGAM

Part	Note: If you a	Loss From Rental Real Estate and re in the business of renting personal proper	d Ro ty, use	yalties Schedule	C. See	instru	ctions. If you a	are an ind	ividual, rep	ort farı	n
A [or loss from Form 4835 on page 2, line 40. ayments in 2023 that would require you	to file	Form(s) 1	0997.5	See ins	structions		□ Ve	s X	No
		will you file required Form(s) 1099? .									
1a		s of each property (street, city, state, ZIF									
Α	5-25/3A RTC	COLONY KHAMMAM TELANGANA I	N 50	07003							
В	0 20/311 1(10			0 7 0 0 0							
1b	Type of Property	2 For each rental real estate proper	rty lis	ted		Fa	ir Rental	Perso	nal Use		JV
	(from list below)	above, report the number of fair r	rental	and			Days	Da	ays	Q	J V
Α	3	personal use days. Check the QJ if you meet the requirements to fi			Α		365		0		
В		qualified joint venture. See instru-			В						
С		4			С						
	of Property:					_					
	Single Family Resid		tal	5 Land			Self-Rental	\			
2	Multi-Family Resid	ence 4 Commercial		6 Roya	ities	8	Other (desc	ribe)			
							Properti	es:			
ncon	ne:				Α		В			С	
3			3		6	01.					
4	Royalties received	d	4								
Exper											
5			5								
6		ee instructions)	6			1.0					
7	-	ntenance	7		2,0	10.					
8			8								
9		reference force	9								
10 11	-	rofessional fees	11		2,1	15					
12	•	paid to banks, etc. (see instructions)	12		∠,⊥	40.					
13			13								
14			14		3,3	21.					
15			15		2,4						
16			16								
17	Utilities		17		2,3	35.					
18	Depreciation expe	ense or depletion	18		3,1	62.					
19	Other (list)	add lines 5 through 10	19								
20	Total expenses. A	odd lines 5 through 19	20		15 , 4	24.					
21		rom line 3 (rents) and/or 4 (royalties). If									
	, , ,	see instructions to find out if you must	١		1 4 0	00					
	file Form 6198 .		21	_	14,8	23.					
22		real estate loss after limitation, if any, ee instructions)	22		L4,82) 3	(,			١
23a	,	nts reported on line 3 for all rental proper				23a	(601.	/(,
b		its reported on line 4 for all royalty prope			-	23b		0011	-		
c		its reported on line 12 for all properties				23c					
d		ats reported on line 18 for all properties				23d	3	,162.			
е		its reported on line 20 for all properties				23e		,424.			
24		itive amounts shown on line 21. Do not	inclu	de any los	ses			. 24			
25	Losses. Add royal	ty losses from line 21 and rental real estate	e loss	es from line	e 22. Ei	nter to	tal losses her	e 25	(14,8	23.)
26		estate and royalty income or (loss).									
		I, and IV, and line 40 on page 2 do not						on			
	Schodula 1 (Form	10/10) line 5. Otherwise include this an	ทดบทฯ	t in tha tat	al on li	no /11	on nage 2	0.0	1	_1 /1	277

Health Savings Accounts (HSAs)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment

Sequence No. **52**

793-26-5762

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. Name(s) shown on Form 1040, 1040-SR, or 1040-NR UDAY KUMAR BAGAM

Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions	X Se	lf-only Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others , see the instructions for the amount to enter	3	3 , 850.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,850.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family		-,
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter	6	3,850.
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3,850.
9	Employer contributions made to your HSAs for 2023		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	500.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,350.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	rate I	HSAs, complete
14a	Total distributions you received in 2023 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructi completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information. Attachment Sequence No. **69**

Identifying number

Name(s) shown on return UDAY KUMAR BAGAM 793-26-5762 Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year.

	• Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below			
Part	Modified Adjusted Gross Income Amount			
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 1a 1	05,017.		
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
2	Add lines 1a through 1e		2	105,017.
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a			
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
4	Add lines 3a through 3e		4	
5	Enter the smaller of line 2 or line 4		5	105,017.
Part	II Credit for Business/Investment Use Part of New Clean Vehicles			
	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$ qualifying surviving spouse; \$225,000 if head of household).	300,000 if m	arried 1	iling jointly or a
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	0.
7	New clean vehicle credit from partnerships and S corporations (see instructions)		7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations,			
	and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line	e 1y	8	0.
Part	Credit for Personal Use Part of New Clean Vehicles	'	•	
	Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$30	00,000 if ma	rried fi	ling jointly or a
	qualifying surviving spouse; \$225,000 if head of household).			
9	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)		9	7,500.
10	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	[10	15,366.
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	[11	
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the per	sonal use		
	part of the credit		12	15,366.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule			
	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.
Part				
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$15 qualifying surviving spouse; \$112,500 if head of household).	0,000 if ma	rried fil	ing jointly or a
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	[15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	[16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part	IV credit	17	
18	Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If	line 17 is		
	smaller than line 14, see instructions		18	
Part	V Credit for Qualified Commercial Clean Vehicles	<u>'</u>		
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see instruction	ns)	20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on			
	K. All others, report this amount on Form 3800, Part III, line 1aa			

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

2023

Attachment Sequence No. **69A**

Identifying number

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

UDA	Y KUMAR BAGAM	793	-26-5762		
Part	Vehicle Details				
1a	Year		2023		
b	Make	TES	LA		
С	Model	MOD	EL3		
2	Vehicle identification number (VIN) (see instructions) 5 Y J 3 E 1 E A 1	P	F 5 9 8 8 3 0		
3	Enter date vehicle was placed in service (MM/DD/YYYY)	06/	24/2023		
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions. ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the United States. ☑ No.				
5	Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax y definitions. ☑ Yes. Go to Part II. ☐ No. Go to line 6.	ear? (See instructions for		
6	Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7.	2 and	placed in service during		
7	Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after during the tax year? See instructions for definitions. Yes. Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described.		·		
Part	Credit Amount for Business/Investment Use Part of New Clean Vehicle				
8	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person. ☑ Yes. ☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale.				
9	Tentative credit amount (see instructions)	9	7,500.		
10	Business/investment use percentage (see instructions)	10	%		
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	11	0.		
Part	Credit Amount for Personal Use Part of New Clean Vehicle				
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	12	7,500.		
			.,		

Schedu	le A (Form 8936) 2023		Page 2		
Part					
13a	Is the sales price of the vehicle more than \$25,000?				
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.				
	∐ No.				
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	le fron	n another person.		
	☐ Yes.☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	oquir	od for roado		
	The stop here. Tou can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	eu ioi resale.		
С	Can you be claimed as a dependent on another person's tax return, such as your parent's retu	rn?			
	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.☐ No.				
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.				
	☐ Yes. ☐ No.				
		ı	l		
4.4	Enter the sales price of the vehicle	14			
14	Enter the sales price of the vehicle	14			
15	Multiply line 14 by 30% (0.30)	15			
16	Maximum vehicle credit amount	16	4,000.		
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line				
••	14 in Part IV of Form 8936	17			
Part	V Credit Amount for Qualified Commercial Clean Vehicle	•			
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exception for certain tax-exempt entities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception applies.				
b	 Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person. Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired resale. 				
С	ls the vehicle also powered by gas or diesel? See instructions. ☐ Yes. ☐ No.	1			
19	Enter the cost or other basis of the vehicle. See instructions	19			
20	Section 179 expense deduction (see instructions)	20			
21	Subtract line 20 from line 19	21			
00	M III II 04 450(/0.45) [000(/0.00) [0] 1 1 40 1 (%) 17				
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22			
23	Enter the incremental cost of the vehicle. See instructions	23			
24	Enter the smaller of line 22 or line 23	24			
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25			
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V				

26