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.

Submission Identification Number (SID)

Taxpay	er's name	Soc	al securit	ty numbe	er					
BHA	SKARREDDY SAREDDY	79-04-	-8941							
Spouse	's name	Spo	use's soc	ial secur	ity number					
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ent	ər yea	ar you a	re auth	norizing.)					
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	8,200.					
2	Total tax			2	0.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	772.					
4	Amount you want refunded to you			4	772.					
5	Amount you owe			5						
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)									

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

				EBO firm name	· ·	Er
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
						1 4

4	8	9	4	1	
Ent dor	as my				

signature on 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. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Date 🕨

Spouse's PIN: check one box only

I authorize

to enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on 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. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's s	Spouse's signature ► D							 		
Practitioner PIN Method Returns Only—continue below										
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 	0 all zei	 2	7 1	1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
-	Must Retain This Form — Se This Form to the IRS Unless		
For Dependence Reduction Act Nation and your t	v roturn instructions	PEV/ 02/16/24 PPO	Earm 8879 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/16/24 PRO

Status Image: Imag	1040)-	VR Department of the Treasury-Inter U.S. Nonresident Ali	nal Reven	ue Service come Tax Ret	turn	2023	OMB No	. 1545-00	174 II	or stapl	Only—Do not w le in this space	e.
Your first name and middle initial Last name Vour first name Vour first name BIASARAREDDY SAREDDY 879-04-8941 Home address number and streell, if you have a foreign address, also complete spaces below. Fill 8136 TABEA Foreign province/state/county Foreign postal code 212 code Filing Single Merried filing space spaces below. Filing Status 704 code Check only Mariae Foreign province/state/county Foreign postal code 212 code Filing Single Merried filing separately (MFS) Qualitying surviving spouse (QSS) Estate Trust Check only if you checked the QSS box, enter the child's name if the qualitying number (9) Relationship or your dependent: Check only Check only <t< td=""><td>For the year Jar</td><td>າ. 1–</td><td>Dec. 31, 2023, or other tax year beginn</td><td colspan="3">ning, 2023, ending</td><td>, 20</td><td colspan="3"></td><td></td></t<>	For the year Jar	າ. 1–	Dec. 31, 2023, or other tax year beginn	ning, 2023, ending			, 20						
Home address frumber and street). If you have a P.O. box, see instructions. Apl. no. 13:550 AMBERLY DR. Friing Single A large address, also complete spaces below. State ZIP code TAMPA Foreign post office. If you have a foreign address, also complete spaces below. File 33.647 Freigin country name Foreign province/stata/country Foreign postal code Trust Filing Single Married filing separately (MFS) Cualifying serving spouse (QSS) Estate Trust Displat Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of adgital asset (or a financial interest in a diptal asset)? C&e instructions) Implet the code instructions; Uppendents (a) First name Last name (2) Dependent's diverse instructions; Implet the code instructions; Implet the code instructions; Income 1a Total amount from Form(3) W-2, box 1 (see instructions) Implet the code instructions; Implet the cod	Your first name	and	middle initial										
13.53.0 AMBERLY DR State ZP code TAMPA Foreign postal code FL 3.647 Foreign country name Foreign province/state/country Foreign postal code Filing Status Trust Foreign postal code Status Single Manied filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Digital Assets At any time during 2023, diry our (a) recaive (as a reward, award, or payment for property or services), cold sponders. (a) Check the box for participation (b) sell, exchange, or observices dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). (a) Check the box for participation (b) sell, exchange, or observices dispose of a digital asset (or a financial interest in a digital asset? (See instructions). (a) Check the box for participation (b) dispose of a digital asset (or a financial interest in a digital asset? (See instructions). (b) Check the box for participation (b) dispose of a digital asset? (See instructions). (b) Check the box for participation (b) dispose of the obset of participation (b) dispose of a digital asset? (Check the box for participation (b) dispose of a digital asset? (Check the box for participation (b) dispose of the obset of participation (b) dispose of a digital asset? (Check the box for participation (b) dispose of the obset of participation (b) dispose of a digital asset? (Check the box for participation (c) dispose of the obset of p	BHASKARRE	EDD	Y	SARE	DDY				8'	879-04-8941			
City, town, or poot office. If you have a foreign address, also complete spaces below. State ZIP code TAMPA File 33647 Foreign country name Foreign province/state/country Foreign postal code Filing Single Married filing separately (MFS) Qualifying surviving spoces (QSS) Estate In rust Check only At any time during 2023, dd you: (a) receive (as a reward, evend, or payment for property or services); (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) Image: Code Code Code Code Code Code Code Code	Home address	(nun	ber and street). If you have a P.O. box	, see ins	tructions.							Apt. no.	
TAMPA PL 33647 Foreign province/state/county Foreign postal code Filing Status Single Married filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Digital Assets If you checked the QSS box, entre the child's name if the qualifying person is a child but not your dependent: Total Total Digital Assets At any time during 2023, did you: (a) recove (as a reward, award, or payment for property or service); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) Image: Check the box if qualifies for digital asset)? (See instructions) Image: Check the box if qualifies (the text) Check text) Check text Image: Check text Check text Image: Check	15350 AME	BER	LY DR										
Foreign country name Foreign postal code Filing Status Single Married filing separately (MFS) Quidifying surviving spouse (QSS) Estate Trust Check only one box. Any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) (e) Sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions) (e) Other the box of guitaler for See instruc- dispondent's Dependents (in finance Last name (g) Dependent's identifying number (g) Relationship to you Child ta credit Credit for other dependents Immont time to the form Immont time form form(s) W-2, box 1 (see instructions) Immont time form Immont time form Immont time form Income 1a Total amount from Form(s) W-2, box 1 (see instructions) Immont time form Immont time form Income 1a Total amount from Form(s) W-2, box 1 (see instructions) Immont time form Immont time form With U.S. 0 Medical waver payments not reported on Form W-2 (see instructions) Immont time for Business f mode and form form 8919, line 6 Immont form Form 8919, line 6 Immont form Form 8919,	City, town, or p	City, town, or post office. If you have a foreign address, a			lete spaces below.			State			ZIP cod	de	
Filing Status Single Married filing separately (MFS) Qualifying surviving spouse (QSS) Estate Trust Digital Assets At any time during 2023, did you; (a) receive (as a reward, award, or payment for property or services) or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset); (See instructions). Image: Single (A) (See instru	TAMPA							FL			33647		
Status A single Indirect lingle space (IN-S) Codalingle southwill spudse (SSS) Easter Indirect lingle space (IN-S) Check only Ifyou checked the CSS box, enter the child's name (Ithe qualifying person is a child but not your dependent: Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). Image: (b) sell, exchange, or otherwise dispose of a digital asset for (See instructions). (g) Dependents (g) Dependent's (g) Dependent's (g) Dependent's (gen instructions) (g) Dependent's (g) Dependent's (g) Dependent's (gen instructions) (g) Dependent's (g) Dependent's (g) Dependent's (gen instructions) (gen instructions) Image: (gen instructions) Image: (gen instructions) If more than four dopendonts, see Image: (gen instructions) Image: (gen instructions) Image: (gen instructions) Image: (gen instructions) If more than four dopendont case beendont case	Foreign country	nan	le	Foreigr	n province/state/cou	unty		Forei	gn posta	l coo	de		
One box.'	If you checked the QSS box, enter the									-	ate	Trust	:
otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). Image is instructions) (4) Check the box if qualities for see instructions) Dependents (see instructions); (e) First name (a) Dependent's (b) Relationship to you (a) Check the box if qualities for see instruc- dependent's see instructions and check here (b) Dependent's (c) Relationship to you (c) Check the box if qualities for see instru- dependent's (c) Relationship to you Income 1a Total amount from Form(s) W-2; box 1 (see instructions) 1a 8, 200. Effectively Mith U.S. Household employee wages not reported on Form(s) W-2; (see instructions) 1a 8, 200. Trade or Business Trade or f Employer-provided adoption benefits from Form 2441, line 26. 1b 1e Wages for more N39, line 6 1i 1g 1i 1g Attach hor Attach exerved for future use. 1i 1i 1g 1g 1042-S, 1042-S, 1042-S, 1042-S, 1044, distributions 1a b Taxable interest 2b 2 Tax-exempt by a tray from Schedule D (Form 1040-NF), item L, 1042-S, 1042-S, 1042-S, 1042-S, 1042-S, 1042-S, 105 1a b Taxable amount 4b 2 Tax-exempt interest 2a b Taxable amount	one box.												
(1) First name Last name (2) Dependent's identifying number (3) Relationship to you Child tax credit Cell for others dependents Coll and credit for others dependents If more than four dependents, see instructions and check here 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 3, 200. Income 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 8, 200. Connected C Tip income not reported on ine ta (see instructions) 1 1 8, 200. Connected C Tip income not reported on Form(s) W-2 (see instructions) 1 1 With U.S. d Medicaid waiver payments not reported on Form (S9) W-2 (see instructions) 1 1 Trade or Taxable dependent care benefits from Form 2441, line 26. 1 1 1 Stach 102-2S, RRB-1042-S, RRB-104-S, RRB-104-	Digital Assets												lo
ester Han Four dependents, see instructions and check hare (1) First name Last name identifying number (2) Relationship to you Cheid tax credit identifying number If more than four dependents, see instructions and check hare 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 1 Income 1 Total amount from Form(s) W-2, box 1 (see instructions) 1 1 8, 200. Effectively b Household employee wages not reported on Form(s) W-2 (see instructions) 1 1 1 Vifth U.S. d Medicald waiver payments not reported on Form (SW-2 (see instructions) 1 1 Trade or Employer-provided adoption benefits from Form 839, line 29 1 1 1 g Wages from Form 819, line 6 . 1 1 1 g Wages from Form 819, line 6 . 1 1 1 g Wages from Form 819, line 6 . 1 1 1 g Add lines 1a through 1h . 1 1 1 1 g Add lines 1a through 1h . . 1 1 1 1 <	-				(2) Dependent's			(4)	Check th	e box	- i -		
dependents, see dependents, see dependents, see dependents, see dependents, see income 1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 8, 200. Effectively b Household employee wages not reported on Form(s) W-2. 1b dependent care benefits from Form(s) W-2. 1c Connected c Tip income not reported on line 1a (see instructions) 1c dependent care benefits from Form (see instructions) 1d Trade or e Taxable dependent care benefits from Form 839, line 26 1e dependent care benefits from Form 839, line 29 1f Business f Employer-provided adoption benefits from Form 839, line 29 1f dependent care benefits from Form 839, line 29 1f fue2.5, sand 228.4, here, Also f Reserved for future use 1j dependent care benefits from Form 1040-NR), item L, line 1(e) 1i dependent care benefits from Form 2441, line 26 1098.pr if Reserved for future use 1i dependent care benefits from Form 2441, line 26 dependent care benefits from Form 2441, l	(see instructions):		(1) First name Last name				(3) Relationship to	you	Child tax	credi	IT I		r
dependents, see dependents, see dependents, see dependents, see dependents, see income 1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 8, 200. Effectively b Household employee wages not reported on Form(s) W-2. 1b dependent care benefits from Form(s) W-2. 1c Connected c Tip income not reported on line 1a (see instructions) 1c dependent care benefits from Form (see instructions) 1d Trade or e Taxable dependent care benefits from Form 839, line 26 1e dependent care benefits from Form 839, line 29 1f Business f Employer-provided adoption benefits from Form 839, line 29 1f dependent care benefits from Form 839, line 29 1f fue2.5, sand 228.4, here, Also f Reserved for future use 1j dependent care benefits from Form 1040-NR), item L, line 1(e) 1i dependent care benefits from Form 2441, line 26 1098.pr if Reserved for future use 1i dependent care benefits from Form 2441, line 26 dependent care benefits from Form 2441, l													
instructions and check here Image: Constructions and check here Image: Construction and check here													
Income 1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 8, 200. Effectively b Household employee wages not reported on Form(s) W-2. 1b 1c Connected c Tip income not reported on line 1a (see instructions) 1c 1c With U.S. d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d 1c Trade or e Taxable dependent care benefits from Form 2839, line 29 1t 1e Business f Employer-provided adoption benefits from Form 8339, line 29 1t 1g Attach h Other earned income (see instructions) 1i 1g 1f Sta-1042-S, at Ado Ines 1a through 1h. f Feserved for future use 1i 1g Sta-1042-S, at Add lines 1a through 1h. f a Qualified dividends 3a b 3b 109- Ri ff 2a ta awas ga anount 4b 1z 8, 200. 109- Ri ff 2a b Tax-exempt intererst 5a b Taxable amount 4b 119- Other earned income form Schedule D (Form 1040) if required. If not required, check here <t< td=""><td>•</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	•												
Effectively b Household employee wages not reported on Form(s) W-2 1b Connected Tip income not reported on line 1a (see instructions) 1c With U.S. Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Trade or Taxable dependent care benefits from Form 8839, line 29 1d Match Femn(s) W-2, id Wages from Form 8919, line 6 1g Attach Other earned income (see instructions) 1i 1g Form(s) W-2, id Reserved for future use 1i 1i RB-1042-5, in R	check here												
Connected view c Tip income not reported on line 1a (see instructions) 1c With U.S. d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Trade or e Taxable dependent care benefits from Form 2441, line 26 1e Business f Employer-provided adoption benefits from Form 8339, line 29 1f Attach h Other earned income (see instructions) 1n Form(s) W-2, in Reserved for future use 1i 1 Attach i Reserved for future use 1i Not22-S, RRB-1042-S, RRB-1042-S, RRB-1042-S, RRB-1042-S, RRB-1042-S, and 2884. k Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1k 2a Tax-exempt interest 2a 2b 2b 3a b Taxable interest 2b 4a (BrA distributions 5a b Taxable amount 4b If you did not get a form W-2, see instructions) 5a b Taxable amount 5b 9 Add lines 12, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 9 8, 2000. 10 Capital gain or (loss). Attach Schedule 1 (Form 1040), line 2	Income	1a	Total amount from Form(s) W-2, bo>	< 1 (see in	nstructions)				[1a		8,200	۱.
With U.S. d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Trade or Eaxable dependent care benefits from Form 2441, line 26. 1e Business f Employer-provided adoption benefits from Form 8839, line 29 1f Attach form(s) W-2, if Reserved for future use 1g Other earned income (see instructions) 1i In SAL 1042-S, is RB8-1042-S, and 8288-A here. Also Reserved for future use 1j RB4-1042-S, and 8288-A here. Also Reserved for future use 1g Inere. Also total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1k 1z 8, 200. 2a Tax-exempt interest 2a 2a b Taxable amount 4b 2b 19 you did not get a Form 6 Reserved for future use 5a b Taxable amount 5b 6e 9 Additional income from Schedule 1 (Form 1040) if required. If not required, check here 7 7 8 Additional income from Schedule 1 (Form 1040), line 20. 8 9 8, 200. 9 Additional income from Schedule 1 (Form 1040), line 20. 9 8, 200.	Effectively	b	Household employee wages not rep	orted on	Form(s) W-2					1b			
Trade or e Taxable dependent care benefits from Form 2441, line 26 1e Business f Employer-provided adoption benefits from Form 8839, line 29 1f Attach g Wages from Form 8919, line 6 1g Attach h Other earned income (see instructions) 1g H Other earned income (see instructions) 1i 1g SAA-1042-S, i Reserved for future use 1i 1j RBE-1042-S, inf RB-1042-S, inf RB-1042-S, inf RB-1042-S, inf (le) Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1k 1i SAA-1042-S, inf (le) A dod lines 1a through 1h 1k 1z 8, 200. Tax-exempt interest 2a 1a b b b 3b Form(s) 2a Tax-exempt interest 2b 2b 2b 2b Tax-exempt interest 2a 1a b Taxable amount 4b 4b<	Connected	С	Tip income not reported on line 1a (see instru	uctions)					1c			
Business Attach Form(s) W-2, 1042-S, and 288-A fere. Also attach Form(s) femome and 288-A ink fmome and 288-A ink fmom and annuities fmom annuities fmom annu	With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see ins	structio	ns)			1d			
Attach Form(s) W-2, 1042-S, SSA-1042-S, and 828-A here. Also Wages from Form 8919, line 6 1g K Other earned income (see instructions) 1i K Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1i K Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e) 1k 1g 1099-R if tax was withheld. 4a b Tax-exempt interest 2a 1099-R if tax was withheld. 4a b Taxable interest 2b 1099-R if tax was withheld. 4a b Taxable amount 4b 11 Form(s) 5a b Taxable amount 5b 16 Pensions and annuities 5a b Taxable amount 6 172-2, see instructions. Feserved for future use 5a b Taxable amount 5b 17 Capital gain or (loss). Attach Schedule D (Form 1040), line 10 5b 6 7 18 Additional income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 11 8,200. 10 Adjustments to income from Schedule 1 (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) </td <td>Trade or</td> <td>е</td> <td>•</td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td>- F</td> <td>-</td> <td></td> <td></td> <td></td>	Trade or	е	•		-				- F	-			
Attach Form(s) W-2, set Reserved for future use	Business	f											
Form(s) W-2, inspective of the series of instructions) inspective of instructions) inspective of instructions) inspective of instructions) 1042-S, is Reserved for future use is Reserved for future use is is reserved for future use is is reserved for future use is is reserved for future use RRB-1042-S, RRB-1042-S, and 2828-A is reserved for future use is is reserved for	Attach									-			
SSA-1042-S, RRB-1042-S, and 8288-A j Reserved for future use	Form(s) W-2,	h	· ·	,						1h			
RRB-1042-S, and 828-A and 828-A interest from Schedule OI (Form 1040-NR), item L, interest from Schedule OI (Form 1040), item Control (Schedule OI (Schedule OI (Form 1040), item Control (Schedule OI (Schedule OI (Form 1040), item Control (Schedule OI (Schedule OI (Form 1040), item Control (Schedule OI (. 11						
Inter Also Ine 1(e) Ik here. Also z Add lines 1a through 1h 1z 8,200. Form(s) 2a Tax-exempt interest 2a b Taxable interest 2b 1099-R if 2a Tax-exempt interest 3a b Taxable interest 2b 1099-R if 2a Tax-exempt interest 3a b Taxable interest 3b withheld. 4a B Taxable amount 4b 4b 1f you did not 5a b Taxable amount 5b 5b get a Form 6 Reserved for future use b Taxable amount 6 7 W-2, see 7 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here 7 7 8 Additional income from Schedule 1 (Form 1040), line 10 10 10 10 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8, 200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) 11 8, 200. 13 Qualif								• •	•••	IJ			_
Form(s) 1099-R if tax was 2a Tax-exempt interest 2a b Taxable interest 2b 109-R if tax was 3a Qualified dividends 3a b Dratable interest 3b withheld. 4a 3a b Dratable interest 3b 3b withheld. 4a 3a b Dratable interest 3b 3b fy ou did not get a Form W-2, see instructions. 5a Pensions and annuities 5a b Taxable amount 5b 6 Reserved for future use 5a b Taxable amount 5b 6 7 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here 7 7 8 Additional income from Schedule 1 (Form 1040), line 10 8 9 8,200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 9 8,200. 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8,200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 13,850.	here. Also		line 1(e)			• •	. 1k				Ļ.,	0 000	`
109-Pi fr tax was withheld. 3a 3a b Ordinary dividends 3b 4a b Ordinary dividends 3b 4a b Taxable amount 4b 1f you did not get a Form W-2, see instructions. 5a 5a b Taxable amount 5b 6 Reserved for future use 5a b Taxable amount 5b 9 Additional income from Schedule D (Form 1040), line 10 6 7 9 Additional income from Schedule 1 (Form 1040), line 10 7 9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 9 8, 200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 11 8, 200. 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8, 200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 11 8, 200. 13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 12 13, 850. 14 Add lines 12 and 13c Subtract line 14 from line 11. If zero or less,			-	1	1				- F			0,200	•
withheld. 4a b Taxable amount 4b If you did not get a Form W-2, see instructions. 5a b Taxable amount 5b 6 Reserved for future use 5a b Taxable amount 5b W-2, see instructions. 6 Reserved for future use 6 6 7 Capital gain or (loss). Attach Schedule D (Form 1040), line 10 6 7 8 Additional income from Schedule 1 (Form 1040), line 10 7 8 9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 9 8, 200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 11 8, 200. 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8, 200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 11 8, 200. 13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 12 13, 850. 14 Add lines 12 and 13c C 14 13, 850. 14 13, 850. 15 Sub			•							-			
If you did not get a Form W-2, see instructions. 5a b Taxable amount									г				
get a Form W-2, see 6 Reserved for future use									F	-			
W-2, see instructions. 7 7 8 Additional income from Schedule 1 (Form 1040), line 10 8 9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 9 8, 200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 10 10 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8, 200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 13, 850. 13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 13a 13a 14 Add lines 12 and 13c 13c 14 13, 850. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 0.	get a Form								F				
8 Additional income from Schedule 1 (Form 1040), line 10 8 9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 9 8, 200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 9 8, 200. 10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 10 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8, 200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 11 8, 200. 13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 12 13, 850. 14 Add lines 12 and 13c Add lines 12 and 13c 14 13, 850. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 0.									-				
10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income 10 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8,200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 11 8,200. 13a Qualified business income deduction from Form 8995 or Form 8995-A. 13a 12 13,850. 14 Add lines 12 and 13c Add lines 12 and 13c 11 13,850. 13 14 13,850. 14 13,850. 15 0.	instructions.				, ,		-		F	8			
income 10 11 Subtract line 10 from line 9. This is your adjusted gross income 11 8,200. 12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 11 8,200. 13a Qualified business income deduction from Form 8995 or Form 8995-A. 13a 12 13,850. b Exemptions for estates and trusts only (see instructions) 13b 13c c 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 taxable income 15 0.		9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effective	ely cor	nected income		[9		8,200).
12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 13,850. 13a Qualified business income deduction from Form 8995 or Form 8995-A. 13a 12 13,850. b Exemptions for estates and trusts only (see instructions) 13b 13b 13c c 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 taxable income 15 0.		10			,.			-		10			
12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions). 12 13,850. 13a Qualified business income deduction from Form 8995 or Form 8995-A. 13a 12 13,850. b Exemptions for estates and trusts only (see instructions) 13b 13b 13c c Add lines 13a and 13b 13c 13c 14 13,850. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 0.		11	Subtract line 10 from line 9. This is y	our adju	sted gross income	e.			[11		8,200).
13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 13a b Exemptions for estates and trusts only (see instructions) 13b 13b c Add lines 13a and 13b 13c 13c 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 taxable income 15 15		12	Itemized deductions (from Schedu	ile A (Foi	rm 1040-NR)) or, fo	r certa	in residents of Ir	ndia, sta	ndard	12		13,850).
b Exemptions for estates and trusts only (see instructions) 13b 13b 13b c Add lines 13a and 13b 13b 13c 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 taxable income 15 0.		13a											
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 taxable income 15 0.		b	Exemptions for estates and trusts or	nly (see i	nstructions)		. 13 b						
15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 0.		с	Add lines 13a and 13b							13c			
		14	Add lines 12 and 13c							14		13,850).
		15					ble income .			15			

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040-NR (2	2023)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17	0.
	18	Add lines 16 and 17	18	0.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	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	0.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15		
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),	-	
		line 21		
	С	Transportation tax (see instructions)		
	d	Add lines 23a through 23c	23d	
	24	Add lines 22 and 23d. This is your total tax	24	0.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	772.
	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	26	
	27	Reserved for future use .		
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28		
	29	Credit for amount paid with Form 1040-C		
	30	Reserved for future use .		
	31	Amount from Schedule 3 (Form 1040), line 15		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33	772.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	772.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	772.
Direct deposit?	b	Routing number 0 2 1 1 0 0 3 6 1 c Type: C Checking Savings		
See instructions.	d	Account number 7 6 1 2 3 7 9 2 1		
	е	If you want your refund check mailed to an address outside the United States not shown on page 1,		
	06	enter it here. Amount of line 34 you want applied to your 2024 estimated tax 36		
A	36 37			
Amount	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
You Owe	38	Estimated tax penalty (see instructions)	3/	
Third		bu want to allow another person to discuss this return with the IRS? See instructions.		X No
Party	,			
Designee	Desig name	no number (PIN)	lication	
		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	ne hest of my	knowledge and
		they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	,	0
Sign	Your	signature Date Your occupation If th	e IRS sent	you an Identity
Here			tection PIN	, enter it here
		SOFTWARE ENGINEER (see	e inst.)	
	Phon			
Paid	Prepa	arer's name Preparer's signature Date PTIN		eck if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/25/2024 P0208	2703 🗆	Self-employed
Use Only	Firm's	s name GLOBAL TAXES LLC Phone r	10. (678)	965-9522
	Firm's	s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E		3171965
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information. BAA REV 02/16/24 PRO	Form	1040-NR (2023)

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Form 4797, or both.

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

OMB No. 1545-0074

Sequence No. 7B

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Your identifying number

6

72

Attachment

879-04-8941

BHASKARREDDY SAREDDY

Enter amount of income under the appropriate rate of tax. See instructions.

(-1) Oth - ... (-...

	Nature of Income	(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
	Nature of Income			(a) 1070	(b) 1376	(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) trar	nsactions	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.						-NR, line 23a 15	
	Capital Gains and I	Losses F	rom	Sales or Excha	nges of Proper	ty		
losses f exchan	honly the capital gains and from property sales or tiges that are from sources the United States and not	(b) Date acq 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).
effectiv	ely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
	ty interest; report these Ind losses on Schedule D							
(Form 1							1	
	property sales or ges that are effectively						1	
connec	ted with a U.S. business 17 Add columns (f) and (d) of line 16					17	()	
on Sche	edule D (Form 1040),						<u>r /</u>	

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- . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

18

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074 2023

Departm Internal		Attachment Sequence N	•. 7C							
Name sl	hown on Form 1040-NR				Your identifyi					
BHAS	SKARREDDY SAREDDY				879-04-	8941				
Α	Of what country or countries	s were you a citizen or nation	al during the tax year?	INDIA						
В	In what country did you clai	m residence for tax purpose	s during the tax year?	United States		<u></u>				
С	Have you ever applied to be	a green card holder (lawful p	permanent resident) of	the United States? .		Yes	🛛 No			
D										
	A U.S. citizen?						X No			
2.	A green card holder (lawful p	(2), see Pub. 519, chapter 4,				L Yes	🗙 No			
Е		t day of the tax year, enter			er vour U.S.					
-	immigration status on the last day of the tax year. $F1$									
F	Have you ever changed you	r visa type (nonimmigrant sta	tus) or U.S. immigratio	on status?		Yes	🛛 No			
	If you answered "Yes," indic	ate the date and nature of th	e change:							
G	List all dates you entered an	d left the United States durin	ng 2023. See instruction	ns.						
		Canada or Mexico AND co			_					
		or Mexico and skip to item I								
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	tes Da	te entered United States mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States			
				mini, dd, yy		mm, dd, yy				
н		ng vacation, nonworkdays, and				1				
	2021	, 2022	, and 202	23365	··					
I		ax return for any prior year? .					∐ No			
	If "Yes," give the latest year	and form number you filed:	104	ONR						
J		rust?					X No			
		ntribution from a U.S. persor					No			
к		nsation of \$250,000 or more					X No			
		rnative method to determine					□ No			
L	Income Exempt From Tax-	-If you are claiming exempt	ion from income tax ι	under a U.S. income	ax treaty wi	th a foreign	country,			
	complete (1) through (3) belo	ow. See Pub. 901 for more in	formation on tax treation	es.						
1.	Enter the name of the countr				claimed the	treaty benefi	t, and the			
		the columns below. Attach F		1						
	(a) C	ountry	(b) Tax treaty article	(c) Number of month claimed in prior tax yes		mount of exe in current ta				
		on Form 1040-NR, line 1k. E	-			<u> </u>				
	Were you subject to tax in a					∐ Yes	∐ No			
3.	Are you claiming treaty bene					∐ Yes	🗙 No			
м	Check the applicable box if:	e Competent Authority deterr	mination letter to your i							

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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.