IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	yer's name	Social security nu	imber
ADI	THYA GOUD	743-45-94	48
Spouse	e's name	Spouse's social s	ecurity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ent	ter year you are a	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	🖂	92,450.
2	Total tax	2	12,605.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	3 20,257.
4	Amount you want refunded to you	4	7,652.
5	Amount you owe		5

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

ERO firm name	,	Er
X I authorize GLOBAL TAXES LLC to enter or genera	te my PIN	

5	9	4	4	8	as mv
Ent don	aomy				

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 signature 🕨	Date 🕨			
Practitioner PIN Method Returns Only—continue below				
Part III Certification and Authentication – Practitie	oner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five	e-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros			

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 🕨	
	etain This Form — See orm to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax return	instructions. BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

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If you did not g Wages from Form 8919, line 6 1g get a Form h Other earned income (see instructions) 1h W-2, see i Nontaxable combat pay election (see instructions) 1i instructions. i Nontaxable combat pay election (see instructions) 1i Attach Sch. B 2a Tax-exempt interest 2a if required. 3a 0 b Attach Sch. B 2a Tax-exempt interest 2a if required. 3a 0 b Qualified dividends 3a b HA distributions 4a b Standard Pensions and annuities 5a Pensions and annuities 5a b Standard Social security benefits 6a Deduction for- 6a Sigle or Married fling genarately, S13.850 Married fling jointy or C If you elect to use the lump-sum election method, check here (see instructions) 1 Additional income from Schedule 1, line 10 7 Capital gain or (loss). Attach Schedule 1 frequired. If not required, check here 9 9 9.2,450. 9 8 Additional income from Schedule 1, line 26 10 19 Additional income from Schedule 1, line 26 11 9 9.2,450. 12 8 Adultional income from Schedule 1, line 26 11 9 9.2,450. 12 8 Adultines 12 and 13 13 19 <td></td> <td>_</td> <td>•</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>• •</td> <td></td> <td></td> <td></td>		_	•						• •				
ger a form h Other earned income (see instructions) 1h 0. W-2, see i Nontaxable combat pay election (see instructions) 1i 1i z Add lines 1a through 1h 11 11 11 112 112, 826. Attach Sch. B if required. 3a Qualified dividends 3a b 1b 0. Attach Sch. B if required. 3a Qualified dividends 3a b Deduction 3b 3b Standard Deduction for- 6a Social security benefits 5a b Taxable amount 4b 5b Single or Married filing separately, \$13,850 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here instructions) 7 Gail again or (loss). Attach Schedule D if required, check here 9 92,450. \$27,700 10 Adjustments to income from Schedule 1, line 26 10 11 92,450. \$28,800 12 Standard deduction or itemized deductions (from Schedule A) 11 92,450. 12 13,850. 18,800 12 Standard deduction or itemized deductions (from Schedule A) 11 92,450.		t											
W-2, see In Other earlied intooline (see instructions) In 0.1 instructions. i Nontaxable combat pay election (see instructions) In 11 Attach Sch. B if required. a Qualified dividends 12 112,826. Attach Sch. B if required. a Qualified dividends 3a b Tax-exempt interest 2b Attach Sch. B if required. a Qualified dividends 3a b Other earlied interest 2b Standard Geduction for- 6a Social security benefits 6a b Taxable amount 4b Standard Social security benefits 6a b Taxable amount 6b Geduction for- 6a Social security benefits 6a b Taxable amount 6b G If you elect to use the lump-sum election method, check here (see instructions) 10 7 Additional income from Schedule 1, line 10 10 10 10 10 Married filing jointy or Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 10 11 92, 450. <td< td=""><td>,</td><td>g</td><td></td><td></td><td></td><td></td><td>•</td><td></td><td>• •</td><td>· · ·</td><td></td><td></td></td<>	,	g					•		• •	· · ·			
z Add lines 1 a through 1h 112,826. Attach Sch. B 2a Tax-exempt interest 2b attach Sch. B 3a b Taxable interest 2b attach Sch. B 3a b Ordinary dividends 3b attach Sch. B au b Ordinary dividends 3b au IRA distributions 4a b Taxable amount 4b b Taxable amount 5a b Taxable amount 5b Standard Deduction for- 6a Social security benefits 6a b Taxable amount 5b associal security benefits 6a b Taxable amount 7 6b Married filing separately, \$13,850 r Capital gain or (loss). Attach Schedule D if required. If not required, check here 7 7 Married filing soutiving spouse, \$27,700 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 92,450. 11 Subtract line 10 from line 9. This is your adjusted gross income 11 92,450. 11 \$20,800 12 Standard deduction or itemized deductions (from Schedule A) 12 <td>W-2, see</td> <td></td> <td colspan="7"></td> <td>. <u>1</u>n</td> <td>0.</td>	W-2, see									. <u>1</u> n	0.		
Attach Sch. B 2a Tax-exempt interest 2a b Taxable interest 2b if required. 3a Qualified dividends 3a b Ordinary dividends 3b Standard 4a BA distributions 4a b Taxable amount 4b Standard 5a Pensions and annuities 5a b Taxable amount 5b Single or Married filing separately, S13,850 C If you elect to use the lump-sum election method, check here (see instructions) 5 7 Married filing jointly or Cualifying surving spouse, S27,700 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 7 8 -20, 376. 9 92, 450. 10 11 92, 450. 12 13, 850. 12 Standard deduction or itemized deductions (from Schedule A) 12 13, 850. 13 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 13, 850.	instructions.			see inst	ructions)		•	🔲			1-	112 826	
if required. 3a Qualified dividends 3a b 3b 4a IRA distributions 4a b Taxable amount 4b Standard Deduction for- 5a b Taxable amount 4b Single or 6a Social security benefits 5a b Taxable amount 5b Married filing separately, S13,850 c If you elect to use the lump-sum election method, check here (see instructions) . . 6b Married filing jointly or Capital gain or (loss). Attach Schedule D if required. If not required, check here . . 7 Qualifying surving spouse, \$27,700 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . . 9 92, 450. 14 Adjustments to income from Schedule 1, line 26 . . . 11 92, 450. \$20,800 12 Standard deduction or itemized deductions (from Schedule A) . . 12 13, 850. 13 Qualified business income deduction from Form 8995 or Form 8995-A . . . 13 14 Add lines 12 and 13 			-	 20 ∣		· · · ·	ьт	· · · ·	· ·				
Out Guardiantical dividendity involved dividendity dividendity involved dividendity dividendity dividendity involved dividendity ditendity dividendity ditervi										• • •			
Standard Deduction for - 5a Pensions and annuities	·							-					
becuction for - 6a Social security benefits 6a b Taxable amount 6b Married filing separately, \$13,850 c If you elect to use the lump-sum election method, check here (see instructions)	Standard												
Married filling separately, \$13,850 c If you elect to use the lump-sum election method, check here (see instructions) . <th< 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></th<>													
Separately,	Married filing				method.					[
Married filing jointly or Qualifying surviving spouse, \$27,700 8 -20,376. 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 92,450. 9 92,450. 10 Head of household, \$20,800 11 Subtract line 10 from line 9. This is your adjusted gross income 10 12 13,850. 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 13,850. 14 13,850.			, ,		,	•		,		[7		
Qualifying surving spouse, \$27,700992,450.10Adjustments to income from Schedule 1, line 2610Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income1012Standard deduction or itemized deductions (from Schedule A)1213,850.13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 1314	 Married filing iointly or 				•			-				-20,376.	
Subtract line 10 from line 9. This is your adjusted gross income 10 Head of household, \$20,800 11 Subtract line 10 from line 9. This is your adjusted gross income 11 12 13 Standard deduction or itemized deductions (from Schedule A) 12 13 Qualified business income deduction from Form 8995 or Form 8995-A 14 Add lines 12 and 13	Qualifying			,									
Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income1192,450.12Standard deduction or itemized deductions (from Schedule A)1213,850.13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131413,850.					-						. 10	, ,	
\$20,800 12 Standard deduction or itemized deductions (from Schedule A) 12 13,850. If you checked any box under Standard Deduction, 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 13 It Add lines 12 and 13 13 14 13,850.	 Head of household, 		•									92,450.	
In you checked any box under Standard Deduction,13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131413,850	\$20,800			-									
Standard Peduction, 14 Add lines 12 and 13 13,850	any box under							5-A					
		14											
		15	Subtract line 14 from line 11. If zer	o or les	s, enter	-0 This is ye	our t	taxable incom	ie .	<u> </u>	. 15		

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

Form 1040 (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	12,605.
Credits	17	Amount from Schedule 2, lin	e3				[17	
	18	Add lines 16 and 17					[18	12,605.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less, e	enter -0			[22	12,605.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is	your total tax				[24	12,605.
Payments	25	Federal income tax withheld							·
,	а	Form(s) W-2				25a 20),257.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	6)			25c			
	d	Add lines 25a through 25c	,					25d	20,257.
If you have a	26	2023 estimated tax payment					†	26	,
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .		,		30			
	31	Amount from Schedule 3. lin				31			
	32	Add lines 27, 28, 29, and 31.				-		32	
	33	Add lines 25d, 26, and 32. T						33	20,257.
Refund	34	If line 33 is more than line 24	,					34	7,652.
neiuna	35a	Amount of line 34 you want				•		35a	7,652.
Direct deposit?	b	Routing number 1 1 1				X Checking	Savings	oou	,
See instructions.	ď	Account number 9 1 5					Cavingo		
	36	Amount of line 34 you want a			d tax	36			
Amount	37					00			
You Owe	37	Subtract line 33 from line 24 For details on how to pay, go				s		37	
100 0110	38	Estimated tax penalty (see in				38		01	
Third Party		you want to allow another							
Designee		structions	•				omplete be	elow.	× No
Decignee	De	signee's		Phone			onal identific		
	nar	ne		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare th							
Here	bel	ief, they are true, correct, and com	plete. Declaration o	ot preparer (otne	r than taxpayer) is	based on all informat		-	
	Yo	ur signature		Date	Your occupation	1			t you an Identity
la interations 0				COEWNDE ENCINEED		(see in		N, enter it here	
Joint return? See instructions.	Sn	ouse's signature. If a joint return, k	oth must sign	JOFIWARE ENGINEER			If the I	RS sent	your spouse an
Keep a copy for	Op		our must sign.	Date					ction PIN, enter it here
your records.							(see in	st.)	
	Ph	one no. (945) 400-809	1	Email address	ADITHYA.GO	DUD38@GMAIL.C	MC		
Daid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	a ram sac	GAR GUPTA	03/24/2024	P02082	703	Self-employed
Preparer	Fin	m's name GLOBAL TAX	KES LLC			,	Phone	no. (6	678)965-9522
Use Only	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

REV 03/07/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ADITHYA GOUD	743-45	-9448	
	••		

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. Atta	ach Schedule E .	5	-20,376.
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	_	
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	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 8q	-	
q	Scholarship and fellowship grants not reported on Form W-2	8r	-	
r	Nontaxable amount of Medicaid waiver payments included on Form		-	
S	1040, line 1a or 1d	8s (
+	Pension or annuity from a nonqualifed deferred compensation plan or		/	
Ľ	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:	04	-	
-		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			
	1040, 1040-SR, or 1040-NR, line 8		10	-20,376.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses 24d		
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:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

(Form	1040)	(From I	rental real es	tate, royalties, partners	ships, S	6 corporati	ions, es	tates,	trusts, REMI	Cs, etc.)	20	93
	nent of the Treasury Revenue Service		Go to ww	Attach to Form 1040 w.irs.gov/ScheduleE fo					formation.		Attachm Sequend	nent ce No. 13
Name(s) shown on return	-								Your soci	al security i	number
	HYA GOUD									743-4	5-9448	
Part	Note: If yo	ou are in t	he business o	Intal Real Estate an of renting personal proper 4835 on page 2, line 40.	erty, use		c . See	instru	ctions. If you a	are an indiv	/idual, rep	ort farm
A [that would require you		Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	s 🛛 No
												_
1a	Physical addr	ress of e	ach property	y (street, city, state, Zl								
Α	FLAT 206,	NELSF	RI ENCLAN	YE, NIZAMPET HY	DERAI	BAD, TE	LANG.	ANA	IN 500090)		
В												
С												
1b	Type of Prope (from list below			ental real estate propertion of fair				Fa	ir Rental Days	Person Da		QJV
Α	3			ise days. Check the Q			Α		365		0	
В				t the requirements to			В					
С			quaimed jo	pint venture. See instru	uctions	s.	С					
Туре	of Property:	•				•						
	Single Family R Multi-Family Re			cation/Short-Term Rer mmercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	ribe)		
									Properti	es:		
Incom	ne:						Α		B			С
3	Rents received	b			3		8	64.				
4	Royalties rece	ived .			4							
Exper												
5					5							
6	Auto and trave	el (see in	structions)		6							
7	Cleaning and r	maintena	ance		7		3,2	41.				
8	Commissions				8							
9	Insurance .				9							
10	Legal and othe	er profes	sional fees		10							
11	Management f	fees .			11		2,9	85.				
12		-		tc. (see instructions)	12							
13	Other interest				13							
14					14		3,8					
15	1-1				15		4,8	52.				
16					16							
17					17			00.				
18	•		•		18		4,0	96.				
19	Other (list)											
20				ıh 19	20		21,2	40.				
21	result is a (loss	s), see ir	structions to	and/or 4 (royalties). If o find out if you must		-	-20,3	76.				
22				after limitation, if any,	22	(20,37	⁷ 6.)	()	()
23a		-	-	ne 3 for all rental prop				23a	-	864.		,
b				ne 4 for all royalty prop				23b				
с				ne 12 for all properties				23c				
d				ne 18 for all properties				23d	4	,096.		
е				ne 20 for all properties				23e	21	,240.		
24				own on line 21. Do no						. 24		
25	Losses. Add ro	oyalty los	ses from line	21 and rental real esta	te loss	es from lin	e 22. E	nter to	tal losses her	e 25	(2	20,376.)
26	Total rental re	eal esta	te and roya	Ity income or (loss).	Comb	ine lines :	24 and	25. E	nter the resu	ılt		

Supplemental Income and Loss

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . For Paperwork Reduction Act Notice, see the separate instructions.

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

SCHEDULE E

26

-20,376.

OMB No. 1545-0074



e-File DECLARATION FOR ELECTRONIC FILING



Keep this form for your records. Do not send this form to the State of Maryland unless specifically requested to do so. See Instructions.

ADITHYA		GOUD	743459448	
First Name	MI	Last Name	SSN/Taxpayer Identification	Number
Spouse's First Name	MI	Spouse's Last Name	SSN/Taxpayer Identification	Number
Part I Tax Return Information (wh 1. Amount of overpayment to be applied			1.	00
2. Amount of overpayment to be refunde	d to you			90 00

agree with the amounts shown on the corresponding lines of my 2023 Maryland electronic income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent that my return, including accompanying schedules and statements, be sent to the Maryland Revenue Administration Division by my Electronic Return Originator or by my electronic return

Your PIN: check one box only

software provider.

X I authorize GLOBAL TAXES LLC ERO firm name as my signature on my tax year 2023 electronically filed incom	
entering your own PIN and your return is filed using the Practi	ronically filed income tax return. Check this box only if you are tioner PIN method. The ERO must complete Part III below.
Your signature	Date
Spouse's PIN: check one box only I authorize ERO firm name as my signature on my tax year 2023 electronically filed incom I will enter my PIN as my signature on my tax year 2023 elect entering your own PIN and your return is filed using the Praction	ronically filed income tax return. Check this box only if you are
Spouse's signature	Date
Practitioner PIN Me	thod Returns Only
Part III Certification and Authentication - Practitioner PIN N	1ethod Only
ERO'S EFIN/PIN. Enter your six-digit EFIN followed by your five-d	ligit self-selected PIN. 2 2 2 4 9 6 0 8 7 1 Do not enter all zeros.
I certify this numeric entry is my PIN, which is my signature for the taxpayer(s). I confirm that I am submitting this return in accordance Maryland MeF Handbook for Authorized e-file Providers.	
ERO's signature	Date_03242024
	DO NOT MAIL



NONRESIDENT INCOME TAX RETURN



FISCAL YEAR BEGINNING	2023, ENDING				
13459448					
cial Security Number Spo	ouse's Social Security Number	-			
DITHYA					
st Name	MI				
DUD					
st Name					
ouse's First Name	MI				y card? If not, to ensure you g 00-772-1213 or visit ssa.gov.
ouse's Last Name					
1900 RESEARCH RD					
rrent Mailing Address Line 1 (Street No. a	nd Street Name or PO Box)		Marylan	nd County	
117					
rrent Mailing Address Line 2 (Apt No., Suit	te No., Floor No.)		Name of co	wn or Taxing Area unty and incorporated cit	3 ty, town or special taxing area in which you w able period if you earned wages in Maryland. (
RISCO	Τ	X 75034	Instruction	6.)	
		State ZIP Code +	1		
y or Town					
			Foreign Province/	State/County	
y or Town eign Country Name			Foreign Province/	State/County	
			Foreign Province/	State/County	
eign Country Name eign Postal Code FILING STATUS See Instruction 1		equired to file.			
eign Country Name eign Postal Code FILING STATUS See Instruction 1	e claimed on another perso	equired to file.	Head of house	ehold	with dependent child
reign Country Name reign Postal Code FILING STATUS See Instruction 1 CHECK ONE BOX 2. Married filing joint re	e claimed on another perso atus 6.) eturn or spouse had no inc	equired to file. on's tax 4. [5. [some 6. [Head of house Qualifying Sur Dependent ta:	ehold rviving Spouse xpayer (Enter (with dependent child 0 in Exemption Box (A) -
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eign Country Name FILING STATUS See Instruction D CHECK I	e claimed on another perso atus 6.) eturn or spouse had no inc tely, Spouse's SSN▶ 893 Instruction 9. tate of legal residence. ► and 0 ate for the entire year of 20 of the military? return for 2022?	equired to file. on's tax 4. [5. [3508360 <u>TX</u> City, Borough or Tow 023? If no, attach ex es X No If "Ye	Head of house Qualifying Sur Dependent ta: See Instruction	ehold rviving Spouse xpayer (Enter C n 8.) Yes No Yes X No Resident or a	D in Exemption Box (A) -
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teign Country Name	e claimed on another person atus 6.) eturn or spouse had no inc tely, Spouse's SSN▶ 893 Instruction 9. tate of legal residence. ► and 0 ate for the entire year of 20 of the military? return for 2022? Ye 2023. If none, enter "NONE caxes withheld in error. (Check appropriate box(es	equired to file. on's tax 4. [5.] some 6. [3508360 <u>TX</u> City, Borough or Tow 023? If no, attach ex es X No If "Ye E": FROM <u>None</u> (See Instruction 4.	Head of house Qualifying Sur Dependent tax See Instruction nship planation. X s," was it a TO None Claiming depende	ehold rviving Spouse xpayer (Enter C n 8.) Yes No Yes X No Resident or a	D in Exemption Box (A) -
eign Country Name FILING STATUS See Instruction 1 CHECK 1. Single (If you can be return, use Filing St ONE BOX 2. Married filing joint re 3. X Married filing separat RESIDENCE INFORMATION See Enter 2-letter state code for your st If PA resident, enter both County Were you a resident of another sta Are you or your spouse a member Did you file a Maryland income tax Dates you resided in Maryland for 2 Check here for Maryland to EXEMPTIONS See Instruction 10. Information Form 502B to this form	e claimed on another person atus 6.) eturn or spouse had no inc tely, Spouse's SSN▶ 893 Instruction 9. tate of legal residence. ► and 0 ate for the entire year of 20 of the military? return for 2022? Ye 2023. If none, enter "NONE caxes withheld in error. (Check appropriate box(es	equired to file. on's tax 4. [5. [3508360 <u>TX</u> City, Borough or Tow 023? If no, attach ex es X No If "Ye E": FROM None (See Instruction 4. applicable exemption	Head of house Qualifying Sur Dependent tax See Instruction nship planation. X s," was it a TO None Claiming depende	ehold rviving Spouse xpayer (Enter C n 8.) Yes No Yes X No Resident or a (MM nts, you must	D in Exemption Box (A) -
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eign Country Name FILING STATUS See Instruction 1 CHECK 1. Single (If you can be return, use Filing St ONE BOX 2. Married filing joint re 3. X Married filing separat RESIDENCE INFORMATION See Enter 2-letter state code for your si If PA resident, enter both County Were you a resident of another sta Are you or your spouse a member Did you file a Maryland income tax Dates you resided in Maryland for 2 Check here for Maryland to EXEMPTIONS See Instruction 10. Information Form 502B to this form A. ► X Yourself ► Spo	e claimed on another personatus 6.) eturn or spouse had no inc tely, Spouse's SSN ▶ 893 Instruction 9. tate of legal residence. ▶ and 0 ate for the entire year of 20 of the military? return for 2022? Ye 2023. If none, enter "NONE caxes withheld in error. (Check appropriate box(es m in order to receive the a buse Enter number components	equired to file. on's tax 4. [5. [some 6. [3508360 <u>TX</u> City, Borough or Tow 023? If no, attach ex es X No If "Ye E": FROM None (See Instruction 4. b). NOTE: If you are applicable exemption thecked 1 See	Head of house Qualifying Sur Dependent ta: See Instruction s," was it a TO None claiming depende amount. Instruction 10	ehold rviving Spouse xpayer (Enter C n 8.) Yes No Yes X No Resident or a (MM nts, you must	D in Exemption Box (A) -
reign Country Name reign Postal Code FILING STATUS See Instruction 1 CHECK 1. Single (If you can be return, use Filing St BOX 2. Married filing joint re 3. X Married filing separat RESIDENCE INFORMATION See Enter 2-letter state code for your s' If PA resident, enter both County Were you a resident of another sta Are you or your spouse a member Did you file a Maryland income tax Dates you resided in Maryland for 2 Check here for Maryland t EXEMPTIONS See Instruction 10. Information Form 502B to this form A. ► X Yourself ► Spo B. ► 65 or over ► 65 comparison	e claimed on another personatus 6.) eturn or spouse had no inc tely, Spouse's SSN▶ 893 Instruction 9. tate of legal residence. ► and 0 ate for the entire year of 20 of the military? return for 2022? Ye 2023. If none, enter "NONE caxes withheld in error. (Check appropriate box(es m in order to receive the a buse Enter number co or over d Enter number c	equired to file. on's tax 4. [5. [5.] 5.	Head of house Qualifying Sur Dependent tax See Instruction nship planation. X s," was it a TO None claiming depende amount. Instruction 10	ehold rviving Spouse xpayer (Enter C n 8.) Yes No Yes X No Resident or a (MM nts, you must A.\$	D in Exemption Box (A) - Nonresident return? MDDYYYY). attach the Dependents' 3200 00

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Print Using Blue or Black Ink Only

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NONRESIDENT INCOME TAX RETURN



2023 Page 2

Nam	e ADITHYA GOUD SSN 74345	9448					
INC	OME AND ADJUSTMENTS INFORMATION	(1) FEDERAL INCO	оме	(2) MARYLAND INCO	ME	(3) NON-MARYLAN	D
(See	Instruction 11.)	(LOSS)		(LOSS)		INCOME (LOSS)	
1.	Wages, salaries, tips, etc	I. 112826	00	15863	00	96963	00
2.	Taxable interest income	2	00		00		00
3.	Dividend income	3	00		00		00
4.	Taxable refunds, credits or offsets of state and						
	local income taxes	4	00				00
5.	Alimony received	5	00		00		00
6.	Business income or (loss)	5	00		00		00
7.	Capital gain or (loss)7	7	00		00		00
8.	Other gains or (losses) (from federal Form 4797)	3	00		00		00
9.	Taxable amount of pensions, IRA distributions,						
	and annuities	9	00				00
10.	Rents, royalties, partnerships, estates, trusts, etc.						
	(Circle appropriate item.)	b. <u>-20376</u>	00	0	00	-20376	00
11.	Farm income or (loss) 11	L	00		00		00
12.	Unemployment compensation (insurance) 12	2	00				00
13.	Taxable amount of Social Security and						
	Tier 1 Railroad Retirement benefits	3	00				00
14.	Other income (including lottery or other gambling						
	winnings)	4	00		00		00
15.	Total income (Add lines 1 through 14.)	5. 92450	00	15863	00	76587	00
16.	Total adjustments to income from federal return						
	(IRA, alimony, etc.)	5	00		00		00
17.	Adjusted gross income (Subtract line 16 from line 15.) ► 17	9 2450	00	15863	00	76587	00
ADD	ITIONS TO INCOME (See Instruction 12.)						
18.	Non-Maryland loss and adjustments				18.	20376	00
19.	Other (Enter code letter(s) from Instruction 12.)	▶			19.		00
20.	Total additions (Add lines 18 and 19. See instructions.)				▶ 20.	20376	00
21.	Total federal adjusted gross income and Maryland additions	(Add lines 17 (Column 2	1) and	20.)	21.	112826	00
SUB	TRACTIONS FROM INCOME (See Instruction 13.)						
22.	Taxable Military Income of Nonresident				▶ 22.		00
23.	Other (Enter code letter(s) from Instruction 13.)	▶			23.		00
24.	Total subtractions (Add lines 22 and 23. See instructions.).				▶ 24.		00
25.	Maryland adjusted gross income before subtraction of non-M	Maryland income. (Subtra	act line	e 24 from line 21.)	25.	112826	00
DED	UCTION METHOD See Instruction 15. (All taxpayers mu	ust select one method a	nd ch	eck the appropriate b	ox.)		
26.	a. STANDARD DEDUCTION METHOD (Enter amount on lir	ne 26a.)	26a.	2550	00		
	ITEMIZED DEDUCTION METHOD (Complete lines 26b,	c and d.)					
	b. Total federal itemized deductions (from line 17, federal So	chedule A)►	26b.		00		
	c. State and local income taxes (See Instruction 16.)		26c.		00		
	d. Net itemized deductions (Subtract line 26c from line 26b.	.)	26d.		00		
	e. Deduction amount (Multiply lines 26a or 26d by the AGI factor.) 2	26e. <u>1,000000 (</u> from	n works	heet in Instruction 14)	▶ 26.	2550	00
27.	Net income (Subtract line 26 from line 25.)				27.	110276	00
28.	Total exemption amount (from EXEMPTIONS area, page 1) 5	See Instruction 10			28.	3200	00
29.	Enter your AGI factor (from worksheet in Instruction 14)				29.	1 000000	
30.	Maryland exemption allowance (Multiply line 28 by line 29.)				30.	3200	00
31.	Taxable net income (Subtract line 30 from line 27.) Figure t	tax on Form 505NR			31.	107076	00
MAR	RYLAND TAX COMPUTATION - COMPLETE FORM 505NR	BEFORE CONTINUING	ì.				
32.	a. Maryland tax from line 16 of Form 505NR (Attach Form	505NR.)			.32a.	703	00
	b. Special nonresident tax from line 17 of Form 505NR (Atta						00
	c. Recaptured credit from Part DD, line 1 of Form 502CR.						00
	d. Total Maryland tax (Add lines 32a through 32c.)					1000	00
	Poverty level credit from worksheet in Instruction 20						00



NONRESIDENT INCOME TAX RETURN



2023 Page 3

Name ADITHYA GOUD	individuals from Dart AA	13459448	orm 502CR (Attach Form 502CR.)			00
			this form electronically to claim			
						0 000
-						_
		-	than 0, enter 0		00	_ 01
			e Instruction 21.)▶ 38.		00	
			nd (See Instruction 21.) . 39.		00	
					00	
						0
			ough 41.)		1	_
			forms and attach if MD tax is wit		1220	•
			payments made with an extension rec	•		
			Schedule K-1 (510/511))			-
			R (Attach Form 502CR. See Instruct			
						- •
			line 42.)		1 0 0	
			line 47.)			- •
			Γ ΑΧ		1.0.0	• —
			e 50 from line 49.) See line 54 R			•
		-	(See Instruction 23.)	Total . ► 52		• —
·	attaching Form 502UF					
	, ,		, PAY IN FULL WITH THIS RETURN			
Include Form DV				⊾ 53.		
DIRECT DEPOSIT OF REFUND (if you are requesting direct depos X Check here if you author	See Instruction 23.) Verify	y that all a the followin to issue your	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit.	learly legible.		_ 0
DIRECT DEPOSIT OF REFUND (f you are requesting direct depos X Check here if you author Check here if this refund Check here if this refund 54a. Type of account:	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings	y that all a the followin to issue your side of the Un 5	 ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. nited States. 4b. Routing Number (9-digits) 	learly legible.	0614	_ 0
DIRECT DEPOSIT OF REFUND (if you are requesting direct depos	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs	y that all a the followin to issue your side of the Un 5	 ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. nited States. 4b. Routing Number (9-digits) 	learly legible. Form 588. 111000		•
DIRECT DEPOSIT OF REFUND (If you are requesting direct depos X Check here if you author Check here if this refund	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings	y that all a the followin to issue your side of the Un 5	 ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. nited States. 4b. Routing Number (9-digits) 4d. Name(s) 	l early legible. Form 588.		•
DIRECT DEPOSIT OF REFUND (If you are requesting direct depos X Check here if you author Check here if this refund 54a. Type of account: ► X 54c. Account Number ► Check here if you authorize y electronically. Check here ►	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	iy that all ad the followin to issue your side of the Ur 5 5 5 his return wit 1099G Incor companying	 ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. nited States. 4b. Routing Number (9-digits) 4d. Name(s) 	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled	account eparer not to file 25). Under penalties ge and belief it is tr	
DIRECT DEPOSIT OF REFUND (If you are requesting direct depos X Check here if you author Check here if this refund 54a. Type of account: ► X 54c. Account Number ► Check here if you authorize y electronically. Check here ►	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	iy that all ad the followin to issue your side of the Ur 5 5 5 his return wit 1099G Incor companying	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. hited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author re Tax Refund statement electronically is schedules and statements and to the be	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled	account eparer not to file 25). Under penalties ge and belief it is tr	
DIRECT DEPOSIT OF REFUND (if you are requesting direct depos ► X Check here if you author Check here if this refund 54a. Type of account: ► X 54c. Account Number ► Check here if you authorize y electronically. Check here ► berjury, I declare that I have examination correct and complete. If prepared by	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	is return wit 1099G Incor 2009g yer, the decla	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. hited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author ne Tax Refund statement electronically is schedules and statements and to the be aration is based on all information of white	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled ch the preparer h	account eparer not to file 25). Under penalties ge and belief it is tr has any knowledge. Date	
DIRECT DEPOSIT OF REFUND (If you are requesting direct depos X Check here if you author Check here if this refund Check here if this refund 54a. Type of account: X 54c. Account Number Check here if you authorize y electronically. Check here Derjury, I declare that I have examination correct and complete. Your signature Taxpayer(s) daytime phone number	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	is return wit 1099G Incor 2009g yer, the decla	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. nited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author ne Tax Refund statement electronically schedules and statements and to the be aration is based on all information of whi	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled ch the preparer h	account eparer not to file 25). Under penalties ge and belief it is tr has any knowledge. Date	
DIRECT DEPOSIT OF REFUND (if you are requesting direct depos X Check here if you author Check here if you author Check here if this refund 54a. Type of account: X 54c. Account Number Check here if you authorize y check here yelectronically. Check here Deerjury, I declare that I have examination correct and complete. If prepared by Your signature Taxpayer(s) daytime phone number	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	is return wit 1099G Incor 2009g yer, the decla	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. hited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author ne Tax Refund statement electronically is schedules and statements and to the be aration is based on all information of white Spouse's signature Sygnature of Preparer other than tax	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled ch the preparer h	account eparer not to file 25). Under penalties ge and belief it is tr has any knowledge. Date	
DIRECT DEPOSIT OF REFUND (If you are requesting direct depos X Check here if you author Check here if you author Check here if this refund 54a. Type of account: S4a. Type of account: S4c. Account Number Check here if you authorize y clectronically. Check here Check here if you authorize y clectronically. Check here Your signature Your signature Taxpayer(s) daytime phone number 245	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	is return wit 1099G Incor 2009g yer, the decla	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. hited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author ne Tax Refund statement electronically is schedules and statements and to the be aration is based on all information of white Spouse's signature SyAM PRIYA RAM SAGAE Signature of Preparer other than tax GLOBAL TAXES LLC	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled ch the preparer h	account eparer not to file 25). Under penalties ge and belief it is tr has any knowledge. Date Date	
IRECT DEPOSIT OF REFUND (you are requesting direct depos X Check here if you author Check here if this refund Check here if this refund 4a. Type of account: X 4c. Account Number heck here if you authorize y ectronically. Check here erjury, I declare that I have examinar Your signature Taxpayer(s) daytime phone number 45 ROONEY CT Street address of Preparer/Firm	See Instruction 23.) Verify t of your refund, complete ize the State of Maryland t will go to an account outs Checking Savings 915761388 Your preparer to discuss th f you agree to receive your ned this return, including ac	is return wit 1099G Incor 2009g yer, the decla	ccount information is correct and c ig. For Splitting Direct Deposit, use refund by direct deposit. hited States. 4b. Routing Number (9-digits) ▶ 4d. Name(s) as it ap h us. Check here ▶ if you author me Tax Refund statement electronically schedules and statements and to the be aration is based on all information of white Spouse's signature SyAM PRIYA RAM SAGAF Signature of Preparer other than tax GLOBAL TAXES LLC Printed name of the Preparer/Firm's	ilearly legible. Form 588. 111000 pears on the bank a ize your paid pre (See Instruction 2 st of my knowled ch the preparer h <u>Regupta</u> spayer (Required b name	account eparer not to file 25). Under penalties ge and belief it is tr has any knowledge. Date Date	



For returns filed without payments, mail your completed return to:

Comptroller of Maryland Revenue Administration Division 110 Carroll Street Annapolis, MD 21411-0001

For returns filed with payments, attach check or money order to Form PV. Make checks payable to Comptroller of Maryland. On your check or money order, you must include the social security number/Individual Taxpayer Identification Number of the taxpayer if filing individually, if filing jointly, you must include the social security number/ ITIN of the primary taxpayer on the check. Failure to include this information will delay the processing of your payment. Do not attach Form PV or check/money order to Form 505. Place Form PV with attached check/money order on TOP of Form 505 and mail to:

Comptroller of Maryland Payment Processing PO Box 8888 Annapolis, MD 21401-8888 To make an online payment, scan the QR code below and follow instructions.



NONRESIDENT **INCOME TAX** CALCULATION ATTACH TO YOUR TAX RETURN



	THYA GOUD	743459448
First Na	me MI Last Name	Social Security Number
Spouse	's First Name MI Spouse's Last Name	Spouse's Social Security Num
		,
	u are filing Form 505, use the Form 505NR Instructions appearing on page 2 of this form. u are filing Form 515, use the Form 505NR Instructions appearing in Instruction 18 of the	Form 515 Instructio
PAR1	I - CALCULATION OF TAX WITHOUT ALLOWING CERTAIN MODIFICATIONS	
1.	Enter Taxable net income from Form 505, line 31 (or Form 515, line 32)	107076 (
2.	Enter tax from Tax Table or Computation Worksheet Schedules I or II. Continue to Part II 2	<u>.</u> 5051 (
PAR	II - CALCULATION OF MARYLAND TAX	
3.	Enter your federal adjusted gross income from Form 505	
	(or Form 515), line 17 (Column 1)	
3a.	Earned Income (See instructions.)	
4.	Enter your federal adjusted gross income plus additions from Form 505 (or 515) line 21 4	112826 (
5.	Enter the Taxable Military Income of a Nonresident from line 22 of Form 505 5	(
6a.	Enter your subtractions from line 23 of Form 505 or Form 515	(
6b.	Enter non-Maryland income from Form 505 (or 515) not included on lines 5	
	or 6a of this form (See instructions.) 6b	96963 (
7.	Add lines 5 through 6b	
	Maryland Adjusted Gross Income. Subtract line 7 from line 4	
	If you are using the standard deduction, recalculate the standard	
	deduction based on the income on line 8 and enter on line 8a 8a. 2379 00	
9.	Maryland Income Factor. Divide line 8 by line 3. The factor cannot exceed 1.000000 and	
	cannot be less than 0. If line 8 is 0 or less, the factor is 0. If line 8 is greater than 0 and	
	line 3 is 0 or less, the factor is 1.000000	171585
10	Deduction amount.	••
101	If you are using the standard deduction, multiply the standard	
	deduction on line 8a by line 9 of this form and enter on line 10a 10a 408_00	
	If you are itemizing your deductions, multiply the deduction on	
	Form 505, line 26d, by line 9 of this form and enter on line 10b10b 00	
	Form 515 Users, see Instruction 18 in Form 515 Instructions.	
11	Net income (Subtract line 10a or 10b from line 8.)	. 15455 (
	Exemption amount. Multiply the total exemption amount on Form 505, line 28	10100
12.		. 549 (
10	(or Form 515, line 29) by line 9	-
	Maryland Taxable Net Income (Subtract line 12 from line 11.)	
	Enter the tax amount from line 2 of this form	
15.	Maryland Nonresident factor: Divide the amount on line 13 on this form by line 1.	120210
	If more than 1.000000, enter 1.000000. If 0 or less, the factor is 0	139210
16.	Maryland Tax. Multiply line 14 by line 15. Enter this amount on Form 505, line 32a	
	(Form 515, line 33)	
17.	Special nonresident tax. Multiply line 13 of this form by 0.0225. Enter this amount	
	on Form 505, line 32b. If line 13 is 0 or less, enter 0	. 335 (

18.	Local Income Tax. Multiply line 13 of this form by the local rate of the Maryland county	
	(or Baltimore City) where you are employed. Enter this amount on Form 515, line 39.	
	If line 13 is 0 or less, enter 0	00