## 8879 Form

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

illemai neverue Service		
Submission Identification Number (SID)		
Taxpayer's name	Social security	y number
BHARGAVA NUTHAKKI	112-15-	-0932
Spouse's name		al security number
David Toy Detuye Information Toy Voor Ending December 21 0000 /Fm	+ o x . / o o x . / o / . o v	ro outhorising \
Part I Tax Return Information — Tax Year Ending December 31, 2023 (En Enter whole dollars only on lines 1 through 5.	ter year you ar	e authorizing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		<b>1</b> 7,570.
2 Total tax		2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 824.
4 Amount you want refunded to you		<b>4</b> 824.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	d keen a conv	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend		
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terming payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation in business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	rejection of the tra- e U.S. Treasury are indicated in the ta ution to debit the nate the authorizal equests must be the processing of e payment. I furth	ansmission, (b) the reason of its designated Financial of the preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the recknowledge that the
Taxpayer's PIN: check one box only		
<u></u>	5 DIN	0 9 3 2
X I authorize GLOBAL TAXES LLC to enter or genera	Ente	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don	't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.		
Your signature ► Bhargava Nuthakki Date ►	•	
Spouse's PIN: check one box only		
☐ I authorize to enter or genera	te mv PIN	as my
ERO firm name		er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.		
Spouse's signature ▶ Date ▶	•	
Practitioner PIN Method Returns Only—continue belo		
Part III Certification and Authentication — Practitioner PIN Method Only		
EDOIS FEIN/DIN Enterview of digit FFIN fallowed by your five digit ask aslasted DIN 2	2 2 4 0 7	5 0 0 2 7 1
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2   2   4   9   6 Don't ente	6   0   8   2   7   1   er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	bmitting this retu	rn in accordance with the
ERO's signature ▶ Date ▶	•	
FRO Must Retain This Form — See Instructions		

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

# Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2023

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn			ning, 2023, ending, 20					See sepa instruction		
our first name and middle initial			Last na	ame			Your ide	ntifying num		
						(see instr	(see instructions)			
				NUTHAKKI				112-15-0932		
Home address (number and street). If you have a P.O. box, see instructions.							Apt. n	10.		
3508 S GR	AVE	L CIR								
City, town, or po	ost o	ffice. If you have a foreign address, a	also comp	olete spaces below.		State	Z	IP code		
GRAPEVINE						TX		76092		
Foreign country	nam	е	Foreig	n province/state/county		Foreign	oostal code	Э		
Filing									Trust	
Status	If	you checked the QSS box, enter the		· · · · · · · · · · · · · · · · · · ·			endent:			
Check only one box.										
	Λ± 0	ny timo during 2002, did you (a) rao	oivo (oo o	roward award ar navm	ant for property or or	n ilocoli o	r (b) coll o	vohongo or		
Digital Assets	othe	ny time during 2023, did you: (a) recervise dispose of a digital asset (or a	eive (as a financial	interest in a digital asset	ent for property or se )? (See instructions.)			. <b>Yes</b>	X No	
Dependents	+				, ( ,			f qualifies for (s		
(see instructions):				(2) Dependent's		Chil	d tax credit	Credit for	,	
(		(1) First name Last name	9	identifying number	(3) Relationship to yo	ou O'''		depende	ents	
If more than four								<u> </u>		
dependents, see										
instructions and check here								+ $+$		
	10	Total amount from Form(s) W-2, bo	ay 1 (000 i	(notructions)			 . 1a	7	570.	
Income Effectively	1a b	Household employee wages not re	•	•					<del>370.</del>	
Connected	c	Tip income not reported on line 1a								
With U.S.	d	Medicaid waiver payments not rep					. 1d			
Trade or	е	Taxable dependent care benefits fi					. 1e			
Business	f	Employer-provided adoption benef					. 1f			
	g	Wages from Form 8919, line 6 .	. 1g							
Attach Form(s) W-2,	h Other earned income (see instructions)									
1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use	. <u>1j</u>							
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from								
here. Also		line 1(e)	. 1z							
attach Form(s)	z								570.	
1099-R if	2a	Tax-exempt interest 2								
tax was withheld.	3a 4a	Qualified dividends	. 3b . 4b							
If you did not	4a 5a	Pensions and annuities	. 46 . 5b							
get a Form	6	Reserved for future use	. 6							
W-2, see instructions.	7		_							
instructions.	8									
	9								570.	
	10	Adjustments to income from Sche	dule 1 (Fo	orm 1040), line 26, These	e are vour <b>total adi</b> u	stments	to			
			•		•					
	11	Subtract line 10 from line 9. This is	your <b>adj</b> ı	usted gross income			. 11	7,	570.	
	12	Itemized deductions (from Sched						10	0.5.0	
		deduction (see instructions)				naia Tre	aty <b>12</b>	13,	850.	
	13a	Qualified business income deducti								
	b	Exemptions for estates and trusts					120			
	с 14	Add lines 13a and 13b Add lines 12 and 13c						12	850.	
	14 15	Subtract line 1/1 from line 11 If zero					15	10,0	000.	

Tax and	16	Tax (see instructions). Check if any	from For	rm(s): <b>1</b> 🗌 88	314 <b>2</b> 🗌 497	2 3			16	0.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3					17	0.
	18	Add lines 16 and 17							18	0.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (Form 10	40) .			19	
	20	Amount from Schedule 3 (Form 10	040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zer	ro or less	s, enter -0					22	0.
	23a	Tax on income not effectively control Schedule NEC (Form 1040-NR), lin				23a				
	b	Other taxes, including self-employ line 21				23b				
	С	Transportation tax (see instruction	ıs)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is your	total ta	<b>x</b>					24	0.
Payments	25	Federal income tax withheld from:								
	а	Form(s) W-2				25a		824.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	824.
	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 20	22 return				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Sc	hedule 8	3812 (Form 1040	)	28				
	29	Credit for amount paid with Form	1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 10	040), line	15		31				
	32	Add lines 28, 29, and 31. These ar	e your <b>t</b> e	otal other paym	ents and refunda	ble cre	dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, a	ınd 32. T	hese are your <b>to</b>	otal payments .				33	824.
Refund	34	If line 33 is more than line 24, sub	tract line	24 from line 33.	This is the amoun	nt you <b>o</b> v	erpaid		34	824.
	35a	Amount of line 34 you want refund	ded to y	ou. If Form 8888	is attached, chec	k here			35a	824.
Direct deposit?	b	Routing number 1 2 2 1	0 0	0 2 4	<b>c</b> Type:	Checkir	ıg 🗌	Savings		
See instructions.	d	Account number 7 9 0 0	0 2	3 3 8						
	е	If you want your refund check ma enter it here.	iled to a	n address outsion	le the United State	es not sl	nown on	page 1,		
	36	Amount of line 34 you want applie	ed to you	ur 2024 estimat	ed tax	36				
Amount	37	Subtract line 33 from line 24. This	is the ar	mount you owe						
You Owe		For details on how to pay, go to w	ww.irs.g	ov/Payments or	see instructions .				37	_
	38	Estimated tax penalty (see instruc	tions) .			38				
Third	Do yo	u want to allow another person to o	discuss t	his return with th	ne IRS? See instru	ctions.		s. Compl	ete bel	low. 🗵 <b>No</b>
Party Designee	Designame	nee's		Phone			Persor numbe	nal identifi er (PIN)	cation	
		penalties of perjury, I declare that I have they are true, correct, and complete. De								
Sign	Your	Your signature Date Your occupation						If the	e IRS s	ent you an Identity
Here	ВНа	rgava Nuthakki			DATA ANALY	ST			ection inst.)	PIN, enter it here
	Phone			Email address						
Paid	Prepa	rer's name	reparer	's signature		Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA	SYAM 1	PRIYA RAM	SAGAR GUPTA	04/09	/2024	P02082	2703	Self-employed
Use Only	Firm's	name GLOBAL TAXES L	LC					Phone n		78)965-9522
Coc Ciny	Firm's	address 245 ROONEY CT	E BF	RUNSWICK N	J 08816			Firm's El	IN 8	4-3171965

Form 1040-NR (2023)

BAA

#### **SCHEDULE NEC** (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name shown on Form 1040-NR BHARGAVA NUTHAKKI Your identifying number 112-15-0932

Enter amount of income under the appropriate rate of tax. See instructions.				( ) 100/			(d) Other (specify)			
		Nature of Income			(a) 10%		<b>(b)</b> 15%	(c) 30%	%	%
1	Dividends and divide	end ec	uivalents:							
а	Dividends paid by U.	S. co	rporations		1a					
b	Dividends paid by fo	reign	corporations		1b					
С	Dividend equivalent p	aymei	nts received with respect to section 871(m)	transactions	1c					
2	Interest:									
а	Mortgage				2a			•		
b			ns		2b					
С					2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	-		right royalties		4					
5			, recording, publishing, etc.)		5					
6	Real property incom	e and	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9										
10	·									
а	Winnings									
b					10c					
11	Gambling—Resident Note: Enter winnings	s of c only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13	Add lines 1a through	12 in	columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busine						-NR, line 23a <b>15</b>	
			Capital Gains an	d Losses I	From	Sales or Excha	anges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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).
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),								( )	
	797, or both.	18	Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	er the net gain her	re and on line 9 ab	ove. If a loss, ente	er -0 <b>18</b>	

#### **SCHEDULE OI** (Form 1040-NR)

#### **Other Information**

Attach to Form 1040-NR.

OMB No. 1545-0074

Your identifying number

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

2023	
Attachment Sequence No. <b>7C</b>	

BHA	RGAVA NUTHAKKI				112-15-0932						
Α	Of what country or countries w	vere you a citizen or nationa	al during the tax year?	' INDIA		_					
В	In what country did you claim residence for tax purposes during the tax year? United States										
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?										
D	Were you ever:										
_	. A U.S. citizen?										
۷.	A green card holder (lawful per				⊔	res 🔼 No					
_	If you answer "Yes" to (1) or (2				0						
Е	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. $F1$										
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
	If you answered "Yes," indicate the date and nature of the change:										
G	List all dates you entered and left the United States during 2023. See instructions.										
	Note: If you're a resident of C				ent intervals,						
	check the box for Canada or	Mexico and skip to item H	<u> </u>	$\square$ Canada	☐ Mexico						
	Date entered United States	Date departed United State	es Da	ate entered United States	Date departed	United States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/c	ld/yy					
н	Give number of days (including	vacation, nonworkdays, and	l I partial davs) vou were	e present in the United S	tates during:						
	2021										
ı	Did you file a U.S. income tax	return for any prior year?	, and 20		···	Yes □ No					
•	If "Yes," give the latest year ar										
J	Are you filing a return for a trus	et?		1 01/1/	П	Yes 🛛 No					
J	If "Yes," did the trust have a l					ies 🖂 NO					
	U.S. person, or receive a contr					Yes 🗌 No					
V	•	•									
K	Did you receive total compens										
	If "Yes," did you use an alterna			•		Yes					
L	Income Exempt From Tax—If				ax treaty with a fo	oreign country,					
	complete (1) through (3) below										
1.	Enter the name of the country,				claimed the treaty l	penefit, and the					
	amount of exempt income in th		· · · · · · · · · · · · · · · · · · ·	1							
	<b>(a)</b> Cou	ntry	(b) Tax treaty article	(c) Number of months	(d) Amount						
				claimed in prior tax yea	irs income in cui	rent tax year					
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
2.	Were you subject to tax in a fo	•	•	•		Yes 🗌 No					
3.	Are you claiming treaty benefit	s pursuant to a Competent	Authority determinati	ion?		Yes 🗵 No					
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to your	return.							
М	Check the applicable box if:										
1.		aking an election to treat in	come from real prope	erty located in the United	d States as effecti	vely connected					
	with a U.S. trade or business u										
2.	You have made an election in	a previous year that has	not been revoked, to	treat income from rea	al property located	d in the United					
	States as effectively connected										
					*						