Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social securit	y number	
JAGADEESH BANDLAMUDI	800-57-		
Spouse's name	Spouse's soci	ial security number	r
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Ent	er vear vou a	re authorizing.	1
Enter whole dollars only on lines 1 through 5.	ci yeai yea ai	ic authorizing.	·)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income		1 1 2	,168.
2 Total tax		2	0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	
4 Amount you want refunded to you		4	
5 Amount you owe		5	0.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	l keep a cop	y of your retu	rn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for row 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 termina payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness 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) I	mitter, or electro- ejection of the tra U.S. Treasury ar idicated in the ta tion to debit the ate the authoriza equests must be the processing of payment. I furti-	onic return origina ansmission, (b) that its designated as preparation soft entry to this accountion. To revoke (a received no late the electronic pather acknowledge	tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the
Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generat	e my PIN	3 1 2 5	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but n't enter all zeros	ao my
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.			
Your signature ▶ Date ▶			
Spouse's PIN: check one box only			
☐ I authorize to enter or generat	e my PIN		as my
ERO firm name	-	er five digits, but	aomy
signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue belo	w		
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	_ _ - -	6 6 1 9 8 er all zeros	9
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 subrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	tax return (origin	nal or amended) I	
ERO's signature ▶ Date ▶			
ERO 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 OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning			ning, 2023, ending, 20					See separate instructions.	
Your first name and middle initial		Last na	ame			Your iden	tifying number		
							(see instructions)		
JAGADEESI	ŀ		BAND	LAMUDI			800-5	7-3125	
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.		•		Apt. no.	
1430, 9TH	I ST	REET							
City, town, or p	ost o	fice. If you have a foreign address, als	so comp	lete spaces below.	;	State	ZI	P code	
CHARLESTO	N					IL	6	1920	
Foreign country	nam nam	е	Foreig	n province/state/county	1	Foreign p			
	1								
Filing		Single	arately (N	ΔES) □ Qualifyi	ng surviving spouse (C	088)	☐ Estat	e 🗌 Trust	
Status		ndent:							
Check only	"	,		4, 9	,				
one box.									
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f						change, or Yes No	
Dependents		······································						qualifies for (see inst.):	
(see instructions)				(2) Dependent's		Child	tax credit	Credit for other	
(0000 0000)		(1) First name Last name		identifying number	(3) Relationship to you	ı Orma	- Lax Credit	dependents	
If more than four							<u> </u>		
dependents, see									
instructions and							<u> </u>		
check here		T. I	4/ .	\				2 160	
Income	1a	Total amount from Form(s) W-2, box	•	,			1a	2,168.	
Effectively	b	Household employee wages not rep		` '			1b		
Connected	C C	Tip income not reported on line 1a (see Medicaid waiver payments not repo					1c		
With U.S.	d	Taxable dependent care benefits fro		` ' ` `	,		1d 1e		
Trade or	e f	Employer-provided adoption benefit		*			1f		
Business	g	Wages from Form 8919, line 6		*			1g		
Attach	9 h	Other earned income (see instruction					1h		
Form(s) W-2, 1042-S,	i	Reserved for future use	,						
SSA-1042-S,	i	Reserved for future use					1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1				
and 8288-A here. Also		line 1(e)			1k				
attach	z	Add lines 1a through 1h					1z	2,168.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	b Tax	kable interest		2b		
tax was	3a	Qualified dividends 3a	a	b Ord	dinary dividends		3b		
withheld.	4a	IRA distributions 4a	3	b Ta:	kable amount		4b		
If you did not	5a	Pensions and annuities 5a	a	b Ta	kable amount		5b		
get a Form W-2, see	6	Reserved for future use					6		
instructions.	7	Capital gain or (loss). Attach Schedu							
	8	Additional income from Schedule 1							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	9	2,168.					
	10	Adjustments to income from Sched income	10						
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			11	2,168.	
	12	Itemized deductions (from Schedu	,	,,					
		deduction (see instructions)	ty 12	13,850.					
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995	-A . 13a				
	b	Exemptions for estates and trusts of	• .	•					
	С	Add lines 13a and 13b							
	14							13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	0.	

Form 1040-NR (2	2023)									Page 2
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1	14 2 [4972	2 3			16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line							17	0.
	18	Add lines 16 and 17							18	0.
	19	Child tax credit or credit for other depende	19							
	20	Amount from Schedule 3 (Form 1040), line	20							
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0						22	0.
	23a	Tax on income not effectively connected w	ith a U.S. trade o	r business	from					
		Schedule NEC (Form 1040-NR), line 15 .				23a				
	b	Other taxes, including self-employment tax	x, from Schedule	2 (Form 1	040),					
		line 21			.	23b				
	С	Transportation tax (see instructions)			. [23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is your total tax	x						24	0.
Payments	25	Federal income tax withheld from:								
•	а	Form(s) W-2				25a				
	b	Form(s) 1099			. [25b				
	С	Other forms (see instructions)			. [25c				
	d	Add lines 25a through 25c							25d	
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amount							26	
	27	Reserved for future use			- 1	27				
	28	Additional child tax credit from Schedule 8	812 (Form 1040)		.	28				
	29	Credit for amount paid with Form 1040-C			.	29				
	30	Reserved for future use			- t	30				
	31	Amount from Schedule 3 (Form 1040), line			ī	31				
	32	Add lines 28, 29, and 31. These are your to	32							
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T							33	
Refund	34	If line 33 is more than line 24, subtract line							34	
11010110	35a	Amount of line 34 you want refunded to you				•	-		35a	
Direct deposit?	b	Routing number X X X X X X					ing \square			
See instructions.	d	Account number X X X X X X						J		
	e	If you want your refund check mailed to ar						page 1.		
		enter it here.								
	36	Amount of line 34 you want applied to you	ır 2024 estimate	ed tax .		36				
Amount	37	Subtract line 33 from line 24. This is the an	nount you owe.		'					
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or	see instruc	tions .				37	0.
	38	Estimated tax penalty (see instructions) .			.	38				
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								lete be	low. 🛛 No
Party	Designee's Phone Personal identif									
Designee	name nonumber (PIN)									
		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of								
Sign	Your	signature	Date Your occupation				If th	e IRS s	ent you an Identity	
Here	Tour organization Date 1			Protection PIN, en						
11010	STUDENT (see						inst.)			
	Phone	e no.	Email address					'		
Paid	Prepa	rer's name Preparer'	s signature			Date		PTIN		Check if:
Paid	VENK?	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA	SAI PAVAN KU	MAR DUDI	PALLI			P0247	0833	Self-employed
Preparer	Firm's name CIODAI TAVES IIC									
Use Only		saddress 245 ROONEY CT E BR	UNSWICK N.	T 08816				Firm's E		8-2145487

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. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number JAGADEESH BANDLAMUDI 800-57-3125 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 150/	(c) 30%	(d) Other (specify)		
	Nature of income		(a) 10% (b) 15%		(c) 30%	%	%	
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations	1a						
b	Dividends paid by foreign corporations	1b						
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c						
2	Interest:							
а	Mortgage	2a						
b	Paid by foreign corporations	2b						
С	Other	2c						
3	Industrial royalties (patents, trademarks, etc.)	3						
4	Motion picture or TV copyright royalties	4						
5	Other royalties (copyrights, recording, publishing, etc.)	5						
6	Real property income and natural resources royalties	6						
7	Pensions and annuities	7						
8	Social security benefits							
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):	1 10						
13	Add lines 1a through 12 in columns (a) through (d)	13				+		
14	Multiply line 13 by rate of tax at top of each column	14						
15	Tax on income not effectively connected with a U.S. trade or business. Add column			I. Enter the total here	and on Form 1040	-NR. line 23a 15		
	Capital Gains and Losses							
losses t	nly the capital gains and from property sales or ges that are from sources the United States and not (if necessary, attach statement of descriptive details not shown below) (b) Date accomm/dd/y	quired	(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).	
	rely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
gains a	ry interest; report these nd losses on Schedule D							
(Form 1	,							
exchan	property sales or ges that are effectively							
	ted with a U.S. business edule D (Form 1040),				17			
	18 Capital gain. Combine columns (f) and (g) of line 1	7. Ent	er the net gain here	e and on line 9 abo	ove. If a loss, ente	er -0 18		

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Internal Revenue Service Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name s	hown on Form 1040-NR				Your identifying	number				
JAGF	ADEESH BANDLAMUDI				800-57-3	125				
Α	Of what country or countries w									
В	In what country did you claim	residence for tax purpose	s during the tax year?	United States						
С	Have you ever applied to be a	green card holder (lawful p	permanent resident) of	the United States? $$.		☐ Yes	⊠ No			
D	Were you ever:									
	A U.S. citizen?						⊠ No			
2.	A green card holder (lawful pe	-				☐ Yes	⊠ No			
	If you answer "Yes" to (1) or (2	•	· ·							
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. $_{\rm F1}$									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	left the United States durin	g 2023. See instruction	ns.						
	Note: If you're a resident of C									
	check the box for Canada or	r Mexico and skip to item I	<u> </u>	🗌 Canada	Mexico					
	Date entered United States	Date departed United Stat	es Da	ate entered United State		arted Unite	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy				
			_ _							
			_ _							
					N - 4					
Н	Give number of days (including 2021	, 2022	, and 20	23 365			_			
ı	Did you file a U.S. income tax					⊠ Yes	☐ No			
	If "Yes," give the latest year ar									
J	Are you filing a return for a true					☐ Yes	⊠ No			
	If "Yes," did the trust have a U.S. person, or receive a cont					☐ Yes	□No			
V	Did you receive total compens	•				□ Yes	□ No No			
K	If "Yes," did you use an alterna						□ No			
L	Income Exempt From Tax—If			•						
-	complete (1) through (3) below				ax troaty with	i a loroigii	oountry,			
1.	Enter the name of the country, amount of exempt income in the	the applicable tax treaty art	icle, the number of mo	onths in prior years you	claimed the tre	eaty benefi	t, and the			
	(a) Cou		(b) Tax treaty article	(c) Number of month	(d) Am	ount of exe	omnt			
	(a) 000	ппту	(b) Tax treaty article	claimed in prior tax ye		n current ta				
	(e) Total. Enter this amount o	n Form 1040 ND line 11: D	o not optor it opyrisha	ro alaa an lina 1						
2.	Were you subject to tax in a fo		•			Yes	□ No			
	Are you claiming treaty benefit		•	•		☐ Yes	⊠ No			
٥.	If "Yes," attach a copy of the (-			163	<u> </u>			
М	Check the applicable box if:	John potonit / tathonty deteri	ation lotter to your	. Otalii.						
	This is the first vear you are m	aking an election to treat in	come from real prope	erty located in the Unite	ed States as ef	fectively c	onnectea			
	This is the first year you are m with a U.S. trade or business u	aking an election to treat ir under section 871(d). See ir								