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)

l axpayer's name	Social security number				
SHRUSHITHA BODANAM	479-87-9019				
Spouse's name Spouse's social security numb					
Double Tow Dotwee Information Tow Yoon Ending December 01 00000 (E					
Part I Tax Return Information – Tax Year Ending December 31, 2023 (E	nter year you are 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	1 24,655.				
2 Total tax	2 1,083.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 962.				
4 Amount you want refunded to you	4				
5 Amount you owe	· · · · · 5 121.				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a copy of your return)				
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer					

wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from t 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

X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	_ /	
	raumonze	GEODIIE	1111110		to enter or generate my rin	Er	1
				ERO firm name		- - - -	

7	9	0	1	9	as mv
Ent dor	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 E	ate 🖡							
Practitioner PIN Method Returns Only—continue	bel	ow						
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.	2	2	2	 	0 all zer	2	7 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 🕨	
ERO Must Retain This F Don't Submit This Form to the I	-		
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

La 1040)_	VR Department of the Treasury-Inter U.S. Nonresident Ali	nal Reven	ue Service come Tax Ret	urn	2023	OMB N	lo. 154	15-0074	or stap	ole in this	· ·
For the year Jan	n. 1–I	Dec. 31, 2023, or other tax year beginn	ing	, 20	23, en	iding		, ;	20		ee sepa Istructi	
Your first name and middle initial				Last name Your identifying number (see instructions)								
SHRUSHITH	IA		BODA	NAM					479	-87-9	019	
Home address ((num	ber and street). If you have a P.O. box	, see ins	tructions.							Apt.	no.
12806 VAR	SI	Y CLUB CT									103	1
City, town, or po	ost c	ffice. If you have a foreign address, al	so comp	lete spaces below.			Stat	e		ZIP co	de	
TAMPA							FL			3361	.2	
Foreign country	nan	le	Foreigr	n province/state/cour	nty		Fore	eign p	ostal co	de		
Filing Status Check only one box.		Single Married filing separation of the QSS box, enter the contract of the QSS box.				surviving spous				state		Trust
		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a t							(b) sell,			🗙 No
Dependents							(4) Che	ck the bo	x if quali	fies for (see inst.):
(see instructions):	1			(2) Dependent's identifying number		(2) Deletienskin te		Child	d tax cred	dit C	Credit fo	
	-	(1) First name Last name				(3) Relationship to you					dependents	
If more than four	-											<u>]</u> 1
dependents, see									\square			<u></u>
instructions and check here									$\overline{\Box}$			1
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)					 . 1a		24.	655.
Effectively	b	Household employee wages not rep		,							/	
Connected	c	Tip income not reported on line 1a (
With U.S.	d	Medicaid waiver payments not repo								1		
Trade or	е	Taxable dependent care benefits fro							. 1e	,		
Business	f	Employer-provided adoption benefit	ts from F	orm 8839, line 29					. 1f			
	g	Wages from Form 8919, line 6							. 1g			
Attach Form(s) W-2,	h	Other earned income (see instructio	ns).			<u>.</u>			. 1h	1		
1042-S,	i	Reserved for future use				. 1i						
SSA-1042-S,	j	Reserved for future use						•	. 1 j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)										
attach Form(s)	z	Add lines 1a through 1h	1	· · · · · ·						-	24,	655.
1099-R if	2a	Tax-exempt interest 2a				ole interest				-		
tax was	3a	Qualified dividends 3a				ary dividends .				-		
withheld.	4a	IRA distributions 4a				ole amount						
lf you did not get a Form	5a	Pensions and annuities 5a				ole amount						
W-2, see	6 7	Reserved for future use										
instructions.	7 8	Additional income from Schedule 1	,	<i>,</i> ,		•				_		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 3	•							-	24	655.
										_	271	055.
	10						• •	•	. 10	-		
	11	Subtract line 10 from line 9. This is y		-							24,	,655.
	12	Itemized deductions (from Schedu deduction (see instructions)				. Std Dedn US					13,	,850.
	13a	Qualified business income deductio										
	b	Exemptions for estates and trusts of							-			
	C	Add lines 13a and 13b								-	1 0	0.5.0
	14 15			· · · · · · ·								850.
	<u>15</u>	Subtract line 14 from line 11. If zero						• •	15			805.

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

Form **1040-NR** (2023)

Form 1040-NR (2023)								Page 2
Tax and	16	Tax (see instructions). Check if any from Fo	orm(s): 1 🗌 8	814 2	4972	3		16	1,083.
Credits	17	Amount from Schedule 2 (Form 1040), lin	e3					17	0.
	18	Add lines 16 and 17						18	1,083.
	19	Child tax credit or credit for other depend	lents from Schec	lule 8812 (Forr	m 1040) .			19	
	20	Amount from Schedule 3 (Form 1040), lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or les						22	1,083.
	23a	Tax on income not effectively connected			1				
	200	Schedule NEC (Form 1040-NR), line 15							
	b	Other taxes, including self-employment t							
	~								
	с	Transportation tax (see instructions)							
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is your total ta					r	24	1,083.
Payments	25	Federal income tax withheld from:							
Fayments	20 a	Form(s) W-2			. 25a		962.		
	a b	Form(s) 1099					902.		
	C L	Other forms (see instructions)						05-1	962.
	d	Add lines 25a through 25c					1	25d	902.
	e	Form(s) 8805					• •	25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments and amour			1			26	
	27	Reserved for future use							
	28	Additional child tax credit from Schedule		,					
	29	Credit for amount paid with Form 1040-C							
	30	Reserved for future use			. 30				
	31	Amount from Schedule 3 (Form 1040), lin							
	32	Add lines 28, 29, and 31. These are your					-	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32.	These are your t	otal payments	s			33	962.
Refund	34	If line 33 is more than line 24, subtract lin	e 24 from line 33	. This is the an	nount you	overpaid		34	
	35a	Amount of line 34 you want refunded to		8 is attached,	check here		. 🗆	35a	
Direct deposit?	b	Routing number X X X X X X	X X X	c Type:	Check	king 🗌 S	avings		
See instructions.	d	Account number X X X X X X X	X X X X	X X X	X X X	Х			
	е	If you want your refund check mailed to a	an address outsid	de the United	States not	shown on p	age 1,		
		enter it here.							
	36	Amount of line 34 you want applied to yo	our 2024 estimat	ed tax .	. 36				
Amount	37	Subtract line 33 from line 24. This is the a							
You Owe		For details on how to pay, go to www.irs.	gov/Payments or	see instructio	ons			37	121.
	38	Estimated tax penalty (see instructions)			. 38				
Third	Do yo	u want to allow another person to discuss	this return with t	ne IRS? See ir	nstructions	Yes	. Comple	ete below.	X No
Party	Desig		Phone				Il identific		
Designee	name		no	, 		number			
	Under	penalties of perjury, I declare that I have examine		ccompanying so	chedules and	statements,	and to the	best of my	knowledge and
	belief,	they are true, correct, and complete. Declaration	of preparer (other	than taxpayer) is	s based on a	II information	of which p	preparer has	any knowledge.
Sign	Your	signature	Date	Your occupa	ation		If the	IRS sent y	ou an Identity
Here									enter it here
				STUDENT			(see i	nst.)	
	Phone		Email address		I _				
Paid	Prepa	rer's name Prepare	r's signature		Date		PTIN	-	eck if:
Preparer	SYAM	1 PRIYA RAM SAGAR GUPTA SYAM	PRIYA RAM	SAGAR GUP	PTA 04/1	.3/2024 H	202082	703 🗆	Self-employed
Use Only	Firm's name GLOBAL TAXES LLC Phone n						Phone no). (678)	965-9522
USE OILLY	Firm's	address 245 ROONEY CT E B	RUNSWICK N	J 08816			Firm's El l	N 84-3	3171965
Go to www.irs.g	gov/Foi	m1040NR for instructions and the latest infor	mation.	B/	AA REV	03/07/24 PRO		Form	1040-NR (2023)

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Internal Revenue Service Name shown on Form 1040-NR 2023 Attachment Sequence No. 7B

%

Your identifying number

479-87-9019

SHRUSHITHA BODANAM

Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% (b) 15% (c) 30% % Dividends and dividend equivalents: 1 Dividends paid by U.S. corporations а 1a 1b b Dividend equivalent payments received with respect to section 871(m) transactions 1c С 2 Interest: 2a а Paid by foreign corporations 2b h 2c С 3 З 4 4 5 Other royalties (copyrights, recording, publishing, etc.) 5 Real property income and natural resources royalties . . 6 6 7 7 8 8 9 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ а 10c b Losses Gambling—Residents of countries other than Canada.
Note: Enter winnings only. Losses aren't allowed 11 11 Other (specify): 12 12 _____

 13
 Add lines 1a through 12 in columns (a) through (d)
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15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15

Capital Gains and Losses From Sales or Exchanges of Property

Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not	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).		
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										
(Form 1040).										
Report property sales or										
exchanges that are effectively connected with a U.S. business	47									
on Schedule D (Form 1040).							()			
Form 4797, or both.	18	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 18								

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

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074
2023
Attachment

	ent of the Treasury Revenue Service									
	hown on Form 1040	-NR				Your identify	Sequence N	0		
SHRU	JSHITHA BOD	ANAM				479-87-				
Α	Of what country	y or countries v	vere you a citizen or nation	al during the tax ye	ar? INDIA					
В	In what country	/ did you claim	residence for tax purpose	es during the tax year	ar? 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.	•	· ·	rmanent resident) of the U				. 🗌 Yes	🗙 No		
E		., .	e), see Pub. 519, chapter 4	•			`			
Е			day of the tax year, enter day of the tax year. $F1$			-				
F			visa type (nonimmigrant sta		ation status?			🗙 No		
•			e the date and nature of th							
G	-		left the United States durir		tions.					
	•		anada or Mexico AND co	-		uent intervals	S,			
	check the box	for Canada or	Mexico and skip to item I	<u>H.</u> <u>.</u>	🗌 Canada	Mexic	0			
		United States	Date departed United Stat	tes	Date entered United State	es Date d	eparted Unite	d States		
	mm/o	dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy			
н	Give number of	days (including	vacation, nonworkdays, an	d partial days) you w	vere present in the United	States during	g:			
		• • •	, 2022		-					
I	Did you file a U	.S. income tax	return for any prior year? .					🗌 No		
			nd form number you filed:					_		
J			st?				. Yes	🗙 No		
			U.S. or foreign owner under ribution from a U.S. persor	•				No		
К	-		ation of \$250,000 or more							
IX.			ative method to determine							
L	· •		you are claiming exempt							
	complete (1) th	rough (3) below	. See Pub. 901 for more in	formation on tax tre	eaties.		Ū			
1.			the applicable tax treaty ar			l claimed the	treaty benefi	t, and the		
	amount of exem	•	e columns below. Attach F	· · · ·						
		(a) Cou	ntry	(b) Tax treaty artic	cle (c) Number of mont claimed in prior tax ye		Amount of exe ne in current ta			
								an year		
-			n Form 1040-NR, line 1k. [-						
	• •		preign country on any of the					🗌 No 🔀 No		
ა.	-		ts pursuant to a Competen Competent Authority deter	•			. Yes			
м	Check the appl			inination letter to yo						
			aking an election to treat in	ncome from real pro	operty located in the Unit	ed States as	effectively c	onnected		
			under section 871(d). See i				-	🗌		
2.			n a previous year that has d with a U.S. trade or busi				located in th	ne United		

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

BAA