## 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

	10.10.100 00.1100						
Submi	ssion Identification Number (SID)						
Taxpaye	r's name	Social security number					
JAGA	ADEESH VARMA CHINTALAPATI	272-99-3195					
Spouse'	s name	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Vear voll a	re au	thorizina	1		
	whole dollars only on lines 1 through 5.	year you e	i C aa	tilonzing	•)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	10	,934.		
2	Total tax		2		0.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		11.		
4	Amount you want refunded to you		4		11.		
5	Amount you owe		5				
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and I	кеер а сор	y of y	our retu	ırn)		
my known return (to send for any Agent t paymer authoriz paymer busines taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmal my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the paid identification number (PIN) below is my signature for the income tax return (original or amended) I and in Funds Withdrawal Consent.	e are the amitter, or electro- ection of the to S. Treasury a cated in the to in to debit the the authorizates must be processing of ayment. I fur	ounts for the counts of the co	from the inturn original ssion, (b) the designated paration so to this accuration for revoke ved no late ectronic parking where the design of	acome tax ator (ERO) he reason I Financial iftware for ount. This (cancel) a er than 2 ayment of e that the		
	yer's PIN: check one box only						
X		mv PIN 9	3 2	1 9 5	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	ao my		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.						
Your s	ignature ▶ Date ▶						
Spous	e's PIN: check one box only						
Г	I authorize to enter or generate	my PIN			as my		
	ERO firm name		ter five	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ent	6 6 er all ze	1 9 8	3 9		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the text of the for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	ıx return (origi itting this reti	nal or urn in a	amended) accordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	o 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 beginn				nning, 2023, ending, 20				See separate instructions.			
Your first name and middle initial								our identifying number			
				(5					see instructions)		
JAGADEESH VARMA				CHINTALAPATI					-3195		
Home address (number and street). If you have a P.O. box, see instructions.								Apt. no.			
921 THURSTIN STREET									46		
City, town, or post office. If you have a foreign address, also complete spaces below.								ZIP code			
BOWLING G			F			OH			402		
Foreign country	nam	e	Foreigr	n province/state/county	/	Foreign	postal co	oae			
	1										
Filing Status	X	□ E:	state	☐ Trust							
	If	you checked the QSS box, enter the c	hild's na	ame if the qualifying pe	rson is a child but not	your dep	endent:				
Check only one box.								-			
	At a	ny time during 2023, did you: (a) recei	ve (as a	reward, award, or payr	ment for property or se	ervices): c	or (b) sell	exch	nange, or		
Digital Assets		erwise dispose of a digital asset (or a fi									
Dependents						(4) Cł	neck the bo	ox if qu	ualifies for (see inst.):		
(see instructions):		(4) First rans		(2) Dependent's	(O) Deletie releie te co	Child t			Credit for other		
	-	(1) First name Last name	identifying number		(3) Relationship to yo	ou			dependents		
If more than four							$\overline{}$				
dependents, see							$\dashv$				
instructions and check here							$\overline{}$		H		
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1	<u>. T</u>	10,934.		
Effectively	b	Household employee wages not repe	•	,					•		
Connected	С	Tip income not reported on line 1a (s		* *				;			
With U.S.	d	Medicaid waiver payments not repor	ted on F	Form(s) W-2 (see instru	ctions)		. 10	i			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 16	,			
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 11				
Attach	g	Wages from Form 8919, line 6	. 10	,							
Attach Form(s) W-2,	h	Other earned income (see instruction	. 11	۱							
1042-S,	i	Reserved for future use									
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1		. 1				
and 8288-A	k	Total income exempt by a treaty from									
here. Also attach	_	line 1(e)			1k		-		10 024		
Form(s)	z 2a	Add lines 1a through 1h Tax-exempt interest 2a	1	1			. 12		10,934.		
1099-R if		Qualified dividends 3a			rdinary dividends .		. 3t				
tax was withheld.	4a	IRA distributions 4a			axable amount						
If you did not	5a	Pensions and annuities 5a			axable amount			_			
get a Form	6	Reserved for future use									
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	le D (Fo	rm 1040) if required. If	not required, check he	ere	□ 7				
c dotoror	8	Additional income from Schedule 1 (	. 8								
<ul> <li>9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income</li> <li>10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income</li></ul>							. 9		10,934.		
								,			
	11 Subtract line 10 from line 9. This is your adjusted gross income								10,934.		
	12	Itemized deductions (from Schedu deduction (see instructions)		2	13,850.						
	13a	Qualified business income deduction									
13a Qualified business income deduction from Form 8995 or Form 8995-A .    b Exemptions for estates and trusts only (see instructions)											
							. 13	С			
	14	Add lines 12 and 13c					. 14	ı	13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>t</b>	axable income .		. 18	5	0.		

Form 1040-NR (2	2023)										Page	
Tax and	16	Tax (see instructions). Check if any	from For	rm(s): <b>1</b>	314 <b>2</b> [	4972	2 ;	3 🗌		16	0	
Credits	17	Amount from Schedule 2 (Form 10	040), line	3						17	0	
	18	Add lines 16 and 17									0	
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)										
	20	Amount from Schedule 3 (Form 1040), line 8										
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If ze	ro or less	s, enter -0						22	0	
	23a	Tax on income not effectively cons Schedule NEC (Form 1040-NR), lir		vith a U.S. trade			23a					
	b	Other taxes, including self-employ line 21			•	· · · · · · · · · · · · · · · · · · ·	23b					
	С	Transportation tax (see instruction					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		11.			
	b	Form(s) 1099				. [	25b					
	С	Other forms (see instructions) .				. [	25c					
	d	Add lines 25a through 25c								25d	11	
	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				- 1	27					
	28	Additional child tax credit from Sc				h	28					
	29	Credit for amount paid with Form					29					
	30	Reserved for future use				h	30					
	31	Amount from Schedule 3 (Form 10					31					
	32	Add lines 28, 29, and 31. These ar	,.				ole cr	edits .		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, a								33	11	
Refund	34	If line 33 is more than line 24, sub								34	11	
riciana	35a	Amount of line 34 you want <b>refun</b>					-	=	_	35a	11	
Direct deposit?	b	Routing number 0 4 4 0			<b>c</b> Type:		Check		Savings			
See instructions.	d	Account number 5 0 2 5				T		 				
	e	If you want your refund check ma				d State	s not	 shown or	n page 1			
		enter it here.										
	36	Amount of line 34 you want applie					36	]				
Amount	37	Subtract line 33 from line 24. This										
You Owe		For details on how to pay, go to w		•		ions .				37		
104 0110	38	Estimated tax penalty (see instruc				.	38					
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.									olete be	low. 🗵 No	
Party	Designee's				Phone Personal id							
Designee	name nonumber (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which											
Sign			Ciaration				u on a	II Informatio			, ,	
Here	Your signature			Date Your occupation STUDENT				Pro		ent you an Identity PIN, enter it here		
ŀ	Phon	e no		Email address		_			(36)	J 11131.)		
			Preparer	's signature		Т	Date		PTIN		Check if:	
Paid	VENEATA CAT DAVAN KIMAD DIDTDALLI VENEATA CAT DAVAN KIMAD DIDTDALLI DO 2470						רכסחי	Self-employe				
Preparer												
Use Only		0202112 1111120 2		NITATOTAT CIT	T 00016					no. (678)965-9522		
- 1	Firm's address 245 ROONEY CT E BRIINSWICK N. 1 08816 Firm's EIN									בווע צ	8-2145487	

BAA

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

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

Your identifying number

JAGADEESH VARMA CHINTALAPATI 272-99-3195 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: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings \_\_\_\_\_ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) . . . . . . . . . . . . 13 14 14 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 (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). 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 (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 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 Form 4797, or both.

# SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

#### **Other Information**

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. 7C

Name shown on Form 1040-NR  Your identifying nur											
JAGA	DEESH VARMA CHINTALA	272-99-3195									
Α	Of what country or countries were you a citizen or national 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:										
1.	A U.S. citizen?		☐ Yes	⊠ No							
2.	A green card holder (lawful per		☐ Yes	⊠ No							
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
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.										
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 during									
	Note: If you're a resident of C				ent intervals,						
	check the box for Canada or	Mexico and skip to item F	<u>.                                    </u>	$\square$ Canada	☐ Mexico	☐ Mexico					
	Date entered United States	Date departed United State	es	Date entered United State			d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	ım/dd/yy					
			_								
Н	Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during:  2021, and 2023, and 2023										
I	Did you file a U.S. income tax					<b>∐</b> Yes	⊠ No				
_	If "Yes," give the latest year ar						<u></u>				
J	Are you filing a return for a trust?										
	U.S. person, or receive a contr					□ <b>v</b>					
V						∐ Yes □ Yes	□ No ⊠ No				
K	Did you receive total compens		-			=	□ No				
L	, ,										
-	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.										
1.	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.										
	(a) Cou	ntry	(b) Tax treaty art	icle (c) Number of month	hs (d) Amount of exempt						
				claimed in prior tax ye	ars income in	x year					
	<u></u>	E 4040 115 11 11 5		1 1							
^	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
						∐ Yes	∐ No ⊠ No				
3.	Are you claiming treaty benefit If "Yes," attach a copy of the C		-			∐ Yes	△ NO				
М	Check the applicable box if:	Joinpetent Authority detern	mation letter to y	our return.							
	This is the first year you are many	aking an election to treat in	come from real n	roperty located in the Unit	ed States as eff	ectively o	nnected				
	with a U.S. trade or business u	under section 871(d). See in	structions				. 🗌				
2.	You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions										