## 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

Submi	ission Identification Number (SID)				
Taxpaye	er's name	Social securi	ty numl	per	
SAR	ANSH GROVER	103-85	-148	6	
Spouse'	's name	Spouse's soo	ial sec	urity numbe	er
Part	Tax Return Information — Tax Year Ending December 31, 2022 (En	er year you a	re au	thorizing	a.)
	whole dollars only on lines 1 through 5.	, ,	0 0.0.		9-7
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	4:	1,289.
2	Total tax		2	:	3,194.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		2,793.
4	Amount you want refunded to you		4		
5	Amount you owe		5		401.
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	l keep a cop	y of y	our reti	urn)
return ( to send for any Agent t paymen authori paymen busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfer my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into finitiate and the financial institution account into the financial institution and the financial institution into the financial institution into the financial finitiation receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) and resolve is successful.	smitter, or electricejection of the true. U.S. Treasury andicated in the trution to debit the authorizequests must be processing or payment. I fur	onic reransmismod its of ax prepartion. The receiff the elanger according to the receiff the receiff the according to the according to the receiff the according to the according to the receiff the according to th	turn origin ssion, (b) to designate oration so this according to this according to the thin according to the thin according to the thin according personal design of the thin according to the thin ac	ator (ERO the reason d Financia oftware fo count. This (cancel) a ter than 2 payment one that the
	nic Funds Withdrawal Consent.  yer's PIN: check one box only				1
X		e my PIN	1 4	4   8   6	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	do 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 <b>and</b> your return is filed using the Practitioner PIN me below.				
Your s	signature ► Date ►				
Spous	se's PIN: check one box only	_			,
	I authorize to enter or general	e mv PIN			as my
	ERO firm name	En		digits, but	,
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r 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 <b>and</b> your return is filed using the Practitioner PIN me below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belo	w			
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ent	6 3 er all ze		8 9
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file 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	tax return (origonitting this return	inal or urn in a	amended) accordanc	
ERO's	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

OMB No. 1545-0074

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

For the year Jar	n. 1–D	ec. 31, 2022, or other tax year begin	ining	, 2022,	ending		:	20		See separate instructions.	
Filing Status		Single Married filing sel	, ,	,	ng surviving sp	,	,		state	☐ Trust	
Check only one box.			S rian				ur deper				
Your first name	and i	niddle initial	Last na	ame				Your id		ying number ions)	
SARANSH			GROV	ER				103-	-85-	-1486	
Home address	(numl	oer and street). If you have a P.O. bo	x, see ins	structions.						Apt. no.	
2401 CALV	ERT	ST NW				30	1				
City, town, or p	ost of	ffice. If you have a foreign address, a	also comp	olete spaces below.			State		ZIP	code	
WASHINGTO	N						DC		200	008	
Foreign country	nam	e	Foreig	n province/state/county			Foreign	postal co	de		
Digital Assets		ny time during 2022, did you: (a) rec rwise dispose of a digital asset (or a						or (b) sell,		ange, gift, or  Yes X No	
Dependents							(4) Ch	eck the bo	x if qu	alifies for (see inst.):	
(see instructions):		(1) First name Last nam	0	(2) Dependent's identifying number	(3) Relationsh	in to vo	Chi	Child tax credit Credit for othe dependents			
		(1) This manie Last name	<u> </u>	lacitarying nambor	(o) Helationsi	iip to ye	<u>u</u>			dependents	
If more than four											
dependents, see											
instructions and check here											
Income	1a	Total amount from Form(s) W-2, bo	ny 1 (see i	instructions)				. 1a		41,289.	
Effectively	b	Household employee wages not re	,	,				. 1b		11,200.	
Connected	c	Tip income not reported on line 1a	•	· /				. 10			
With U.S.	d	Medicaid waiver payments not rep	`	,				. 10			
Trade or	е	Taxable dependent care benefits for		` '	,			. 1e			
Business	f	Employer-provided adoption bene		•				. 1f			
Duomioco	g	Wages from Form 8919, line 6.		·				. 1g			
Attach	h	Other earned income (see instructi	ons) .					. 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use			1i						
SSA-1042-S,	j	Reserved for future use						. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fro	om Sched	lule OI (Form 1040-NR), i	tem L,						
here. Also		line 1(e)			1k						
attach	Z	Add lines 1a through 1h						. 1z		41,289.	
Form(s) 1099-R if	2a	Tax-exempt interest	2a	<b>b</b> Tax	able interest .			. 2b	,		
tax was	3a	Qualified dividends	За	<b>b</b> Ord	dinary dividend	ls.		. 3b	,		
withheld.	4a	IRA distributions	la l	<b>b</b> Tax	able amount .			. 4b			
If you did not	5a	Pensions and annuities	5a	<b>b</b> Tax	able amount .			. 5b			
get a Form W-2, see	6	Reserved for future use									
instructions.	7	Capital gain or (loss). Attach Scheo									
	8	Other income from Schedule 1 (Fo							_		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	s your <b>total effectively c</b>	onnected inc	ome .		. 9	-	41,289.	
	10	Adjustments to income:									
	а	From Schedule 1 (Form 1040), line						_			
	b	Reserved for future use						_			
	C	Reserved for future use						-			
	d	Enter the amount from line 10a. The	,	•						44	
	11	Subtract line 10d from line 9. This							+	41,289.	
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)								12,950.	
	13a	Qualified business income deducti									
	b	Exemptions for estates and trusts									
	С	Add lines 13a and 13b									
	14									12,950.	
	15	Subtract line 14 from line 11. If zer	o or less	enter -()- This is voi ir tar	xable income			1.5	. 1	28 339	

Tax and	16	Tax (see instructions). Check if any from For	m(s): <b>1</b> 🗌 88	14 <b>2</b> 4972	2 3 🗌	1	6 3,	,194.
Credits	17	Amount from Schedule 2 (Form 1040), line	3			1	7	0.
	18	Add lines 16 and 17				1	8 3,	,194.
	19	Child tax credit or credit for other depende	ents from Schedu	ule 8812 (Form 104	10)	1	9	
	20	Amount from Schedule 3 (Form 1040), line	8			2	20	
	21	Add lines 19 and 20				2	21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0			2	22 3,	,194.
	23a	Tax on income not effectively connected w Schedule NEC (Form 1040-NR), line 15 .			23a			
	b	Other taxes, including self-employment talline 21	,	, ,,	23b			
	С	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c				23	3d	
	24	Add lines 22 and 23d. This is your total tax	x			2	24 3,	194.
Payments	25	Federal income tax withheld from:						
_	а	Form(s) W-2			<b>25a</b> 2	,793.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				25	<b>5d</b> 2,	793.
	е	Form(s) 8805				25	5e	
	f	Form(s) 8288-A				2	5f	
	g	Form(s) 1042-S				25	5g	
	26	2022 estimated tax payments and amount	applied from 20	21 return		2	26	
	27	Reserved for future use			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			30			
	31	Amount from Schedule 3 (Form 1040), line	15		31			
	32	Add lines 28, 29, and 31. These are your to	otal other paym	ents and refunda	ble credits	3	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T	hese are your <b>to</b>	tal payments .		3	2,	,793.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33.	This is the amoun	t you <b>overpaid</b>	3	34	
	35a	Amount of line 34 you want refunded to you	<b>ou</b> . If Form 8888	is attached, chec	k here	. 🗌 35	5a	
Direct deposit?	b	Routing number X X X X X X	Savings					
See instructions.	d	Account number X X X X X X						
	е	If you want your refund check mailed to ar	n address outsid	e the United State	s not shown on	page 1,		
		enter it here.						
	36	Amount of line 34 you want applied to you			36			
Amount	37	Subtract line 33 from line 24. This is the ar	nount you owe.					
You Owe		For details on how to pay, go to www.irs.g		1		3	37	401.
	38	Estimated tax penalty (see instructions) .			38			
Third	Do yo	u want to allow another person to discuss t	his return with th	e IRS? See instruc	ctions. $\square$ Ye	s. Complete	below.	No
Party Designee	Designame	nee's 	Phone no.		Persor numbe	nal identificati er (PIN)	ion	
		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of						
Sign	Your	signature	Date	Your occupation		If the IR	S sent you an lo	dentity
Here				·			on PIN, enter it	here
				GRADUATE A	SSISTANT	(see inst	t.)	$\perp \perp$
	Phone		Email address					
Paid	Prepa	rer's name Preparer	's signature		Date	PTIN	Check if:	
Preparer	SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/12/2023   P02082						)3 Self-em	nployed
Use Only	Firm's	Phone no.	<u>(678)965-9</u>					
y	Firm's	address 245 DOONEY OF F DE	TINICIMIT OF M	T 00016		Firm's FIN	84-31719	65

Form 1040-NR (2022)

## SCHEDULE NEC (Form 1040-NR)

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

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

Attach to Form 1040-NR.

Attachment

Department of the Treasury Internal Revenue Service

2022 Attachment Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR
SARANSH GROVER

Enter amount of income under the appropriate rate of tax. See instructions

Nature of Income				(a) 10%	<b>(b)</b> 150/	(c) 30%	(d) Other (specify)			
						(a) 10%	<b>(b)</b> 15%	(6) 30 %	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U	.S. cor	porations		1a					
b	Dividends paid by fo	reign o	corporations		1b					
С	Dividend equivalent p	oaymer	nts received with respect to section 871(m) t	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b			ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	copyr /	ight royalties		4					
5	Other royalties (copy	yrights.	, recording, publishing, etc.)		5					
6	Real property incom	e and	natural resources royalties		6					
7	Pensions and annuit	ties .			7					
8	Social security bene-	fits .			8					
9	Capital gain from line	e 18 be	elow		9					
10	Gambling – Residents of Canada only. Enter net income in column (c).  If zero or less, enter -0									
а	Winnings									
b			<u> </u>		10c					
11	Gambling winnings- Note: Losses not allo	-Resid	dents of countries other than Canada.		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 busines		, ,	• ( )			0-NR, line 23a <b>15</b>	
			Capital Gains an	d Losses F	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		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).
effectiv	effectively connected with a U.S. business. Do not include a gain									
or loss on disposing of a U.S. real										
	y interest; report these nd losses on Schedule D 040).									
	property sales or									
connec	ges that are effectively ted with a U.S. business	17	Add columns (f) and (g) of line 16 .	l				17	( )	
	on Schedule D (Form 1040), Form 4797, or both.		Capital gain. Combine columns (f) and							

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

**Other Information** 

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

OMB No. 1545-0074 Attachment Sequence No. **7C** Answer all questions. Your identifying number

SAF	RANSH GROVER	103-85-1486									
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?	,									
2	A green card holder (lawful permanent resident) of the United States?										
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, 1	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. F1										
F	Have you ever changed your visa type (nonimmigrant state	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 Canada or Mexico AND commute to work in the United States at frequent intervals, check the box for Canada or Mexico and skip to item H										
	Date entered United States mm/dd/yy Date departed United State mm/dd/yy	Da Da	ate entered United States mm/dd/yy	Date departed Ui mm/dd/							
		$\vdash$									
н	Give number of days (including vacation, nonworkdays, and		a present in the United S	States during:							
••	2020, 2021										
I	Did you file a U.S. income tax return for any prior year? .  If "Yes," give the latest year and form number you filed:			🗵 Ye	s 🗌 No						
J	Are you filing a return for a trust?			Ye	s 🗵 No						
	If "Yes," did the trust have a U.S. or foreign owner under U.S. person, or receive a contribution from a U.S. person?	the grantor trust rul	les, make a distribution	or loan to a	s 🗌 No						
K	Did you receive total compensation of \$250,000 or more of	during the tax year? .		Ye	s 🛛 No						
	If "Yes," did you use an alternative method to determine the	ne source of this con	npensation?	Ye	s No						
L	Income Exempt From Tax—If you are claiming exemptic complete (1) through (3) below. See Pub. 901 for more info			ax treaty with a fore	eign country,						
1	<ul> <li>Enter the name of the country, the applicable tax treaty artical amount of exempt income in the columns below. Attach Fo</li> </ul>			claimed the treaty be	nefit, and the						
	(a) Country	(d) Amount of exempt income in current tax year									
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1										
	. Were you subject to tax in a foreign country on any of the	,	•	∐ <b>Y</b> €							
3	Are you claiming treaty benefits pursuant to a Competent	•		∐ <b>Y</b> €	s 🗵 No						
	If "Yes," attach a copy of the Competent Authority determ	ination letter to your	return.								
M	Check the applicable box if:										
	<ul> <li>This is the first year you are making an election to treat ind with a U.S. trade or business under section 871(d). See in</li> </ul>	structions			🗆						
2	<ul> <li>You have made an election in a previous year that has States as effectively connected with a U.S. trade or busine</li> </ul>	not been revoked, to ess under section 87	o treat income from real (d). See instructions .	al property located i	n the United						