## 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

IIILEIIIAI I	levellue Selvice					
Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numi	er		
SANI	DEEP BIKKA	894-51	-072	9		
Spouse's		Spouse's so			mber	
Doub	Tou Deturn Information Tou Very Ending December 04 0000 (Entern			U!	· \	
Part	, , ,	year you a	are au	inoriz	ing.)	
	vhole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1		26.	283.
2	Total tax		2			394.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			733.
4	Amount you want refunded to you		4			339.
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and k	еер а сор	y of y	our r	eturr	1)
return ( to send for any Agent to paymer authorize paymer business taxes to persona	wledge 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, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected easy in 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 indicated in the function 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 att, 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 preceive confidential information necessary to answer inquiries and resolve issues related to the pail identification number (PIN) below is my signature for the income tax return (original or amended) I are financial information in the conservation of the pail identification number (PIN) below is my signature for the income tax return (original or amended) I are financial institutions.	tter, or electriction of the ties. Treasury a cated in the ties to debit the authoriziests must be processing of ayment. I fur	onic refransmisted in the control of	curn ori	ginato (b) the ated Fin account oke (ca o later ic payredge to	r (ERO) reason nancial vare for nt. This ancel) a than 2 ment of hat the
					_	
	yer's PIN: check one box only	1	0 .	7   2	9	
×	I authorize GLOBAL TAXES LLC to enter or generate in ERO firm name	ř En	ter five		but	as my
	signature on the income tax return (original or amended) I am now authorizing.	uc	n't ente	i ali ze	US	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.					
Your s	ignature ▶ Date ▶					
Spous	e's PIN: check one box only					
	I authorize to enter or generate	nv PIN				as my
	ERO firm name		ter five	digits,		,
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all ze	os	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methology.		_			-
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	6 6	1 9	8	9
		Don't ent	er all ze	ros		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged 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 <i>e-file</i> Providers of Incompany to the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Incompany that the providers of Incompany to the Practition of the Practicion of the Practition of the Practicion of the	itting this ret	urn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o 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 Ja	ın. 1–C	Dec. 31, 2022, or other tax year begin	nning	, 2022,	ending	,	20		ee separate nstructions.
Filing Status		Single Married filing se		•	ng surviving spouse		Es	tate	☐ Trust
Check only one box.					•				
Your first name	e and	middle initial	Last na	ame			Your id		<b>ng number</b> ns)
SANDEEP			BIKK	A			894-	51-0	729
Home address	(num	ber and street). If you have a P.O. bo	x, see ins	structions.			•		Apt. no.
622 NW 1	3TH	ST			#2	1			
City, town, or p	oost o	ffice. If you have a foreign address, a	also comp	lete spaces below.		State		ZIP co	ode
BOCA RATON FL									36
Foreign countr	y nam	е	Foreign	n province/state/county		Foreign	postal co	de	
Digital Asset		ny time during 2022, did you: (a) receivise dispose of a digital asset (or a					or (b) sell,		
Dependents						(4) Ch	eck the box	x if qualit	fies for (see inst.):
(see instructions		(1) First name Last nam	e	(2) Dependent's identifying number	(3) Relationship to y	Chi	ld tax cred	ĺ	Credit for other dependents
If we are the section.									
If more than fou dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see i	nstructions)			. 1a		26,283.
Effectively	b	Household employee wages not re	eported or	n Form(s) W-2			. 1b		
Connected	С	Tip income not reported on line 1a	(see instr	ructions)			. 1c		
With U.S.	d	Medicaid waiver payments not rep	orted on F	Form(s) W-2 (see instruct	tions)		. 1d		
Trade or	е	Taxable dependent care benefits f	rom Form	2441, line 26			. 1e		
Business	f	Employer-provided adoption bene	fits from F	Form 8839, line 29 .			. 1f		
Attack	g	Wages from Form 8919, line 6 .					. 1g		
Attach Form(s) W-2,	h	Other earned income (see instruction	ons) .		<u> </u>		. 1h		
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)			1k				
attach	Z	Add lines 1a through 1h					. 1z		26,283.
Form(s) 1099-R if	2a	Tax-exempt interest	2a	<b>b</b> Tax	cable interest		. 2b	_	
tax was	3a	Qualified dividends	3a	<b>b</b> Ord	dinary dividends .		. 3b		
withheld.	4a	IRA distributions	4a	<b>b</b> Tax	cable amount		. 4b		
If you did not	5a	Pensions and annuities	5а	<b>b</b> Tax	cable amount		. 5b		
get a Form W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Sched	_						
	8	Other income from Schedule 1 (Form 1040), line 10							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	d 8. This is	s your <b>total effectively c</b>	onnected income		. 9	_	26,283.
	10	Adjustments to income:							
	а	From Schedule 1 (Form 1040), line							
	b	Reserved for future use							
	С	Reserved for future use							
	d	Enter the amount from line 10a. The		1					
	11	Subtract line 10d from line 9. This			26,283.				
	12	<b>Itemized deductions</b> (from Sched deduction (see instructions)	ard eaty 12		12,950.				
	13a	Qualified business income deduction from Form 8995 or Form 8995-A .							
	b	Exemptions for estates and trusts	only (see i	instructions)	13b				
	С	Add lines 13a and 13b					. 130	;	
	14	Add lines 12 and 13c					. 14		12,950.
	15	Subtract line 14 from line 11. If zer	o or less.	enter -0 This is your ta	xable income .		. 15		13,333.

Tax and	16	Tax (see instructions). Check if a	ny from Foi	m(s): <b>1</b>	8814	1 2	4972	2 3	B 🗆		16	1,394.
Credits	17	Amount from Schedule 2 (Form	1040), line	3							17	0.
	18	Add lines 16 and 17									18	1,394.
	19	Child tax credit or credit for other	er depende	ents from Scl	hedule	8812 (Fo	orm 104	10) .			19	
	20	Amount from Schedule 3 (Form	1040), line	8							20	
	21	Add lines 19 and 20									21	
	22	Subtract line 21 from line 18. If a	zero or less	s, enter -0-							22	1,394.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),						23a				
	b	Other taxes, including self-emp line 21	•	•		•	· · ·	23b				
	С	Transportation tax (see instructi					1	23c				
	d	Add lines 23a through 23c .	,				_				23d	
	24	Add lines 22 and 23d. This is yo									24	1,394.
Payments	25	Federal income tax withheld fro										
. aymonto	а	Form(s) W-2					.	25a	3	,733.		
	b	Form(s) 1099						25b		,		
	С	Other forms (see instructions)						25c				
	d	Add lines 25a through 25c .									25d	3,733.
	е	Form(s) 8805									25e	· · · · · · · · · · · · · · · · · · ·
	f	Form(s) 8288-A									25f	
	g	Form(s) 1042-S									25g	
	26	2022 estimated tax payments a									26	
	27	Reserved for future use					1	27				
	28	Additional child tax credit from						28				
	29	Credit for amount paid with For					- 1	29				
	30	Reserved for future use						30				
	31	Amount from Schedule 3 (Form						31				
	32	Add lines 28, 29, and 31. These	**					ble cr	edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26									33	3,733.
Refund	34	If line 33 is more than line 24, su	ubtract line	24 from line	33. Th	nis is the a	amount	t you	overpaid		34	2,339.
	35a									35a	2,339.	
Direct deposit?	b											
See instructions.	d											
	е	e If you want your refund check mailed to an address outside the United States not shown on						page 1,				
		enter it here.										
	36	Amount of line 34 you want app	lied to you	ur 2023 estir	mated	tax .		36				
Amount	37	Subtract line 33 from line 24. Th	is is the <b>ar</b>	nount you o	we.							
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments	s or se	e instruct	tions .				37	
	38 Estimated tax penalty (see instructions)											
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								lete bel	ow. 🛛 No		
Party	Designee's Phone Personal i							nal identif	ication,			
Designee	name	name nonumber (PII							er (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 performance.											
Sign	Your	signature		Date	Y	our occu	pation			1		ent you an Identity
Here						10 DDT:13 1	D	NT (7 T N	TEED.	1		PIN, enter it here
-	Di			F		OFTWA	KE El	NGTV	IEEK	(see	inst.)	
	Phone		Dreparer	Email addre	ess		1	Date		PTIN	1	Chook if:
Paid	riepa	arer's name		Ü		יים ייחחוור			4/2022		7707	Check if:
Preparer	r							P02082		Self-employed		
Use Only		s name SYANTENBENTRANTAS (				00016				Phone n	, ,	78)965-9522 4 3171065
- 1		s address 245 ROONEY (	.:: K BE	といいらWICK	NiJ	บหหาค				Firm's E	iiv 8	4-3171965

Form 1040-NR (2022)

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

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

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. Attach to Form 1040-NR.

Attachment
Sequence No. <b>7B</b>

OMB No. 1545-0074

SANDEEP BIKKA Enter amount of income under the appropriate rate of tax. See instructions Your identifying number 894-51-0729

Nature of Income					(a) 10%	<b>(b)</b> 150/	(c) 30%	(d) Other (specify)			
	_	Nature of income				(a) 10%	<b>(b)</b> 15%	(6) 30%	%	%	
1	Dividends and divide	nd eq	uivalents:								
а	Dividends paid by U.	id by U.S. corporations									
b	Dividends paid by for	reign (	corporations		1b						
С	Dividend equivalent p	aymer	its received with respect to section 871(m)	transactions	1c						
2	Interest:										
а	Mortgage				2a						
b	Paid by foreign corpo	oration	ns		2b						
С	Other				2c						
3	Industrial royalties (p	atents	, trademarks, etc.)		3						
4	Motion picture or TV	copyr	ight royalties		4						
5	Other royalties (copy	rights	recording, publishing, etc.)		5						
6	Real property income	e and	natural resources royalties		6						
7	Pensions and annuiti	ies .			7						
8	Social security benef	fits .			8						
9	Capital gain from line	e 18 b	elow		9						
10	Gambling—Residents of Canada only. Enter net income in column (c).  If zero or less, enter -0										
а	Winnings										
b	Losses		<u> </u>		10c						
11	Gambling winnings—Residents of countries other than Canada.  Note: Losses not allowed			11							
12	Other (specify):										
					12						
13	•		columns (a) through (d)		13						
14			tax at top of each column		14						
15	Tax on income not ef	ffectiv	ely connected with a U.S. trade or busine						-NR, line 23a <b>15</b>		
			Capital Gains ar	nd Losses F	rom	Sales or Excha	anges of Proper	ty	T	T	
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		sales or om sources  (if necessary, attach statement of om sources descriptive details not shown below)			(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										
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17	Add columns (f) and (g) of line 16 .					17			
		18	Capital gain. Combine columns (f) and	d (g) of line 17	'. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	er -0 <b>18</b>		

#### **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

SA	ND	EEP BIKKA		894-51-0729									
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 p	ermanent resider	nt) of t	he United States? .		Yes	⊠ No				
D		Were you ever:											
	1.	A U.S. citizen?						☐ Yes	⊠ No				
:	2.	A green card holder (lawful per	rmanent resident) of the Un	ited States? .				Yes	⊠ No				
		If you answer "Yes" to (1) or (2)	), see Pub. 519, chapter 4,	for expatriation r	ules th	nat apply to you.							
Ε		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 2022. See instructions.												
	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	es	Date	e entered United States mm/dd/yy		arted United mm/dd/yy	d States				
Н		Give number of days (including 2020	vacation, nonworkdays, and										
I		Did you file a U.S. income tax	return for any prior year?.					X Yes	□No				
J		Are you filing a return for a trus	st?					☐ Yes	⊠ No				
		If "Yes," did the trust have a U.S. person, or receive a contr						☐ Yes	□No				
K		Did you receive total compens	ation of \$250,000 or more	during the tax yea	ar?.			Yes	⊠ No				
		If "Yes," did you use an alterna	ative method to determine t	the source of this	comp	pensation?		☐ Yes	☐ No				
L		Income Exempt From Tax—If complete (1) through (3) below					ax treaty with	a foreign	country,				
	1.	Enter the name of the country, amount of exempt income in th					claimed the tre	eaty benefi	t, and the				
		(a) Cour	ntry	(b) Tax treaty ar	ticle	(c) Number of month	s <b>(d)</b> Am	ount of exe	empt				
				-		claimed in prior tax yea	ars income i	n current ta	ax year				
		(e) Total. Enter this amount or	Form 10/0-NP line 14 D	not enter it any	whore	a else on line 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 C	•	-				163	<u>~</u> 110				
м		Check the applicable box if:	ompotent Additiontly determ	imation letter to	your re	Julii.							
	1.	This is the first year you are ma	aking an election to treat in	come from real p	roperl	ty located in the Unite	d States as ef	fectively c	onnected				
		with a U.S. trade or business u You have made an election in	ınder section 871(d). See ir	structions					. 🗆				
	۷.	States as effectively connected											