#### 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 securi	Social security number					
FRANCESCA DEL CINQUE	690-15	690-15-7253					
Spouse's name	Spouse's soo	Spouse's social security number					
Part I Tax Return Information — Tax Year Ending December 31, 2022	 2 (Enter year you a	re autho	orizing.)				
Enter whole dollars only on lines 1 through 5.			<u> </u>				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Adjusted gross income		1	8,	588.			
2 Total tax		2		818.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1,	129.			
4 Amount you want refunded to you		4		311.			
5 Amount you owe		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you go	et and keep a cop	y of you	ur returr	1)			
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Pareturn (original or amended) I am now authorizing. I consent to allow my intermediate service provide to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I author Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involv taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Eunds Withdrawal Consent.	or, transmitter, or electron for rejection of the trize the U.S. Treasury a count indicated in the transitution to debit the terminate the authorization requests must be ed in the processing of to the payment. I fur	onic return ransmission and its des ax prepar entry to ation. To e received the elec- ther ackn	n originato on, (b) the signated Firation softv this accourevoke (cad no later tronic payrowledge t	r (ERO) reason nancial vare for nt. This ancel) a than 2 ment of hat the			
Electronic Funds Withdrawal Consent.							
Taxpayer's PIN: check one box only  X I authorize GLOBAL TAXES LLC to enter or g	5 DIN	7 2	5 3				
X I authorize GLOBAL TAXES LLC to enter or g		ter five dig	gits, but	as my			
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter a	III zeros				
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner P below.							
Your signature ▶	Date ▶						
Spouse's PIN: check one box only							
· _	enerate my PIN			as my			
ERO firm name	_	ter five did		asiny			
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter a	II zeros				
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner P below.							
Spouse's signature ► □	oate ►						
Practitioner PIN Method Returns Only—continue	e below						
Part III Certification and Authentication — Practitioner PIN Method Only							
<b>ERO's 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 1 er all zero		9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual i authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Prov	am submitting this retu	ırn in acc	cordanće v				
requirements of the Fractionies is in the flow and Fub. 10-0, Hallubook for Authorized in 3 8-1/18 Flow	idolo di malvidual mcol	no rax M	otuiilo.				
	oate ▶						
ERO Must Retain This Form — See Instruct Don't Submit This Form to the IRS Unless Request							

# E 1040-NR Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2022

OMB No. 1545-0074

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

For the year Jar	n. 1–D	Dec. 31, 2022, or other tax year begin	ning	, 2022,	ending		, 2	0		e separ	
Filing Status	1	Single Married filing se	• •	•	ng surviving spouse	. ,		☐ Esta	ate	П	rust
Check only one box.	If :	you checked the QSS box, enter the c	child's nan	ne if the qualifying persor	n is a child but not y	our de	epende	ent: 			
Your first name	and i	middle initial	Last na	ame				Your ide (see insti			ber
FRANCESCA	A		DEL	CINQUE				690-1	L5-7	253	
Home address	(numl	ber and street). If you have a P.O. bo	x, see ins	structions.						Apt. no	o.
385 MARLB	ORO	UGH STREET			3						
City, town, or p	ost of	ffice. If you have a foreign address, a	also comp	lete spaces below.		Stat	е	Z	ZIP cod	de	
BOSTON						MA		(	211	5	
Foreign country	nam	е	Foreig	n province/state/county		Fore	ign po	stal cod	е		
Digital Assets		ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or a						(b) sell, e			or <b>X No</b>
Dependents						(4	4) Chec	k the box	if qualifi	es for (se	e inst.):
(see instructions):				(2) Dependent's				tax credit	C	redit for o	other
		(1) First name Last nam	e	identifying number	(3) Relationship to y	ou			-	depende	nts
If more than four								$\frac{\sqcup}{\sqcap}$			
dependents, see								$\frac{\sqcup}{\sqcap}$			
instructions and check here								<u> </u>			
		T	4, .					Ц.			- 0 0
Income	1a	Total amount from Form(s) W-2, bo	•	,				1a		8,5	588.
Effectively	b	Household employee wages not re						1b			
Connected	C	Tip income not reported on line 1a						1c			
With U.S.	d	Medicaid waiver payments not rep		` '	,			1d			
Trade or	e	Taxable dependent care benefits for						1e			
Business	f	Employer-provided adoption bene		•				1f			
Attach	g	Wages from Form 8919, line 6 .						1g			
Form(s) W-2,	h :	Other earned income (see instructi	,					1h			
1042-S, SSA-1042-S.	! :	Reserved for future use						4:			
RRB-1042-S,	j							1j			
and 8288-A	k	Total income exempt by a treaty from line 1(e)		iule OI (Form 1040-NR), ii							
here. Also attach	z	Add lines 1a through 1h			<u>IK</u>			1-		Ω 5	88.
Form(s)	2 2a		2a		able interest			1z 2b		0,3	00.
1099-R if	3a	· —	Ba		dinary dividends .			3b			
tax was withheld.	4a		ta		able amount			4b			
If you did not	<del>т</del> а 5а		5a		cable amount			5b			
get a Form	6	Reserved for future use						6			
W-2, see instructions.	7	Capital gain or (loss). Attach Sched					. 🗀				
instructions.	8	Other income from Schedule 1 (Fo	•	, ,	•			8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	,.					9		8.5	588.
	10	Adjustments to income:		,						0 / 0	
	а	From Schedule 1 (Form 1040), line	26		10a						
	b	Reserved for future use									
	С	Reserved for future use			10c						
	d	Enter the amount from line 10a. Th	ese are y	our total adjustments to	income			10d			
	11	Subtract line 10d from line 9. This						11		8,5	588.
	12	Itemized deductions (from Sched deduction (see instructions).		rm 1040-NR)) or, for cer		dia, st	andard	12			129.
	13a	Qualified business income deducti				-	•				
	b	Exemptions for estates and trusts									
	c	Add lines 13a and 13b						13c			
	14							14			129.
	15	Subtract line 14 from line 11. If zero						15			L59.

Tax and	16	Tax (see instructions). Check if any fro	m Form	n(s): <b>1</b> 🗌 88	14 <b>2</b> 4972	2 <b>3</b>			16	818.
Credits	17	Amount from Schedule 2 (Form 1040		17	0.					
	18	Add lines 16 and 17							18	818.
	19	Child tax credit or credit for other de	penden	nts from Schedu	ule 8812 (Form 104	40) .			19	
	20	Amount from Schedule 3 (Form 1040	0), line 8	3					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zero	or less,	enter -0					22	818.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line				23a				
	b	Other taxes, including self-employment 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 to	tal tax						24	818.
Payments	25	Federal income tax withheld from:								
_	а	Form(s) W-2				25a	1	,129.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	1,129.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2022 estimated tax payments and ar	mount a	applied from 20	21 return				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Sche	dule 88	312 (Form 1040)		28				
	29	Credit for amount paid with Form 10-	40-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 1040	0), line 1	15		31				
	32	Add lines 28, 29, and 31. These are y	your <b>tot</b>	tal other paym	ents and refunda	ble cre	edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and	32. Th	ese are your <b>to</b>	tal payments .				33	1,129.
Refund	34	If line 33 is more than line 24, subtract				•	-		34	311.
	35a	Amount of line 34 you want refunded						. Ш	35a	311.
Direct deposit?	b	Routing number 0 1 1 0 0 0 1 3 8 c Type: 🗵 Checking 🗆 Sa								
See instructions.	d	Account number 4 6 6 0 1								
	е	If you want your refund check mailed enter it here.								
	36	Amount of line 34 you want applied				36				
Amount	37	Subtract line 33 from line 24. This is		-						
You Owe		For details on how to pay, go to www			1				37	
	38	Estimated tax penalty (see instruction				38				
Third	Do yo	u want to allow another person to disc	cuss thi	is return with th	e IRS? See instruc	ctions.	Y€	s. Compl	ete bel	ow. 🛛 No
Party Designee	Designame	nee's 		Phone no.			Persor number	nal identifi er (PIN)	cation	
		penalties of perjury, I declare that I have ex they are true, correct, and complete. Declar								
Sign	Your signature Date Your occupation					If the	IRS se	ent you an Identity		
Here					·			Prote	ection	PIN, enter it here
	EMPLOYEE						(see	inst.)		
	Phone			Email address		D :		DTIN		
Paid			•	signature		Date		PTIN		Check if:
Preparer			NKATA	SAI PAVAN KU	MAR DUDIPALLI	03/3	1/2023	P02470		Self-employed
Use Only		name GLOBAL TAXES LLC						Phone no		78)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816								N 8	8-2145487

Form 1040-NR (2022)

### SCHEDULE A (Form 1040-NR)

**Itemized Deductions** 

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

Attach to Form 1040-NR.

OMB No. 1545-0074

2022

Attachment Sequence No. 7A

Department of the Treasury Internal Revenue Service

Caution: If you are claiming a net qualified disaster loss on Form 4684, see instructions for line 7.

Name shown on Fo	rm 104	0-NR		Your iden	tifying	number
FRANCESCA	DEL	CINQUE	5-72	153		
Taxes You Paid	1a	State and local income taxes		429.	-	
	b	Enter the smaller of line 1a or \$10,000 (\$5,000 if married filing separately)			1b	429.
Gifts to U.S. Charities	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions				
Caution: If you made a gift and got	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 3				
a benefit for it, see	4	Carryover from prior year				
instructions.	5	Add lines 2 through 4	5			
Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (other disaster losses). Attach Form 4684 and enter the amount from line 18 instructions	than net c of that for	jualified m. See	6	
Other Itemized Deductions	7	Other—from list in instructions. List type and amount:			7	
Total Itemized Deductions	8	Add the amounts in the far right column for lines 1b through 7. Also, entering 1040-NR, line 12			8	429.

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

REV 03/24/23 PRO

Schedule A (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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7B

Department of the Treasury Internal Revenue Service Name shown on Form 1040-NR

FRANCESCA DEL CINQUE

Your identifying number 690-15-7253

LINCI	amount of moonie and	C1 1110	appropriate rate of tax. See instructions.						(d) Other	r (specify)
			Nature of Income			(a) 10%	<b>(b)</b> 15%	(c) 30%	%	1
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.				1a					
b			corporations		1b					
С		-	nts received with respect to section 871(m)		1c					
2	Interest:	,	, ,							
а	Mortgage				2a					
b			18		2b					
С	Other									
3			s, trademarks, etc.)		3					
4			ight royalties		4					
5			, recording, publishing, etc.)		5					
6			natural resources royalties	6						
7	Pensions and annuities									
8	Social security benefits									
9	Capital gain from line 18 below									
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 winnings	-Resid	dents of countries other than Canada.		11					
12					F.,				+	
12					12					
13			columns (a) through (d)		13				+	
14	-		tax at top of each column		14					
15			ely connected with a U.S. trade or busine			through (d) of line 1	4 Enter the total here	and on Form 1040	D-NR. line 23a <b>15</b>	<del>                                     </del>
	14.000.000		Capital Gains an						· · · · · · · · · · · · · · · · · · ·	1
Enter only the capital gains and losses from property sales or exchanges that are from sources		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq	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).
effectiv	he United States and not ely connected with a U.S.		. ,							
	s. Do not include a gain on disposing of a U.S. real									
propert	y interest; report these nd losses on Schedule D									
(Form 1	040).									
	property sales or									
connec	ges that are effectively ted with a U.S. business	17	Add columns (f) and (g) of line 16 .					17	( )	,
on Schedule D (Form 1040),			Capital gain. Combine columns (f) and						,	<del>                                     </del>

### SCHEDULE OI (Form 1040-NR)

**Other Information** 

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

Attach to Form 1040-NR.

Answer all questions.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

	re snown on Form 1040-NH												
FR	AN	CESCA DEL CINQUE				690-15-7	253						
Α		Of what country or countries w											
В		In what country did you claim	residence for tax purposes	s during the tax y	ear? United States	l 	<u></u>	<u></u>					
С		Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of the United States? .		☐ Yes	⊠ No					
D		Were you ever:											
							☐ 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.											
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 yearF1												
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 C	anada or Mexico AND con	nmute to work in	the United States at frequ	uent intervals,							
		check the box for Canada or	Mexico and skip to item H	<u>I.</u>	🗌 Canada	☐ Mexico							
		Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Date entered United State mm/dd/yy		arted Unite mm/dd/yy	d States					
Н		Give number of days (including											
		2020	, 2021	, ar	nd 2022 365	·							
I		Did you file a U.S. income tax if "Yes," give the latest year an	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	J.S. or foreign owner unde ibution from a U.S. person	r the grantor trus	st rules, make a distribution	n or loan to a	Yes	☐ No					
Κ		Did you receive total compens					Yes	⊠ No					
		If "Yes," did you use an alterna	ative method to determine t	he source of this	compensation?		☐ Yes	☐ No					
L		Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	n a foreign	country,					
	1.	Enter the name of the country, amount of exempt income in the				ı claimed the tr	eaty benefi	t, and the					
		(a) Cour	ntry	(b) Tax treaty ar			nount of ex						
					claimed in prior tax ye	ears income	n current to	ax year					
		() =											
	_	(e) Total. Enter this amount or											
1		Were you subject to tax in a fo			· ·		∐ Yes	∐ No					
;	3.	Are you claiming treaty benefit		-			∐ Yes	<b>⊠</b> No					
		If "Yes," attach a copy of the C	competent Authority detern	nination letter to	your return.								
M		Check the applicable box if:											
		This is the first year you are may with a U.S. trade or business u	inder section 871(d). See in	structions				🗌					
	2.	You have made an election in States as effectively connected											