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 | | |
| AAKI | RITI SAXENA | 096-27-5459 | | | | |
| Spouse' | 's name | Spouse's so | ial secu | urity number | ' | |
| Part | Tax Return Information — Tax Year Ending December 31, 2022 (Ent | er year you a | re au | thorizina. |) | |
| | whole dollars only on lines 1 through 5. | or your your | | | / | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | |
| 1 | Adjusted gross income | | 1 | | 937. | |
| 2 | Total tax | | 2 | | 0. | |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | | 97. | |
| 4 | Amount you want refunded to you | | 4 | | 97. | |
| 5 | Amount you owe | | 5 | | | |
| Part | II Taxpayer Declaration and Signature Authorization (Be sure you get and | l keep a cop | y of y | our retu | rn) | |
| return (to send for any Agent t paymer authori paymer busines taxes t person | owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay 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 in the form of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the 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) I | emitter, or electrejection of the t U.S. Treasury andicated in the totion to debit the atte the authorizequests must be processing of payment. I fur | onic refransmisend its cax preparation. The receiff the elast second in the receiff the acceiments of the elast second in the receiff the acceiments of the elast second in the receiments of the elast second in the elast seco | turn originatession, (b) the designated paration softo this according revoke (eved no late ectronic packnowledge | tor (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the | |
| | nic Funds Withdrawal Consent. yer's PIN: check one box only | | | | | |
| X | | e mv PIN | 5 4 | 4 5 9 | 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 | a.c, | |
| | 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 and your return is filed using the Practitioner PIN me below. | | | | | |
| Your s | signature ▶ Date ▶ | | | | | |
| Snous | se's PIN: check one box only | | | | | |
| | I authorize to enter or generat | e mv 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 if you are entering your own PIN and your return is filed using the Practitioner PIN me below. | | | | | |
| Spous | e's signature ▶ Date ▶ | | | | | |
| | Practitioner PIN Method Returns Only—continue belo | w | | | | |
| 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 4 9 Don't en | 6 3 | 1 9 8 | 9 | |
| | | Don t em | or all 2t | | | |
| 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 subsements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of | mitting this ret | urn in a | accordance | | |
| 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 2022 OMB No. 1545-0074

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

| For the year Ja | an. 1–E | Dec. 31, 2022, or other tax year begi | nning | , 2022, | ending | , | 20 | | e separate tructions. |
|-------------------------------------|----------------------|--|---------------------|------------------------------------|-----------------------|---------|----------------|------------------------|-----------------------------|
| Filing Status | ⊠ Single | | | | | Est | ate | ☐ Trust | |
| Check only one box. | | | | ne if the qualifying persoi | · | • | | | |
| Your first name | e and | middle initial | Last na | ame | | | | entifying tructions | g number |
| AAKRITI | | | SAXE | NA | | | 096- | 27-54 | .59 |
| Home address | (num | ber and street). If you have a P.O. be | ox, see ins | structions. | | | | | Apt. no. |
| 24 CHEST | NUT | AVENUE | | | 2 | | | | |
| City, town, or I | oost o | ffice. If you have a foreign address, | also comp | lete spaces below. | | State | | ZIP code | e |
| JAMAICA | PLAI | N | | | | MA | | 02130 |) |
| Foreign countr | y nam | e | Foreign | n province/state/county | | Foreign | postal co | e | |
| Digital Asset | | ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or | | | | | or (b) sell, (| | |
| Dependent | s | | | | | (4) Ch | eck the box | if qualifie | es for (see inst.) |
| (see instructions | | (1) First name Last nam | ne | (2) Dependent's identifying number | (3) Relationship to y | ou Chi | ild tax credi | II I | edit for other ependents |
| | | (, | | , , | (1) | | | | |
| If more than fou | | | | | | | | + | 一 |
| dependents, se- instructions and | | | | | | | | | |
| check here | ' <u> </u> | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, b | ox 1 (see i | nstructions) | | | . 1a | T | 937. |
| Effectively | b | Household employee wages not re | ` | , | | | | + | |
| Connected | c | Tip income not reported on line 1a | | | | | | + | |
| With U.S. | d | Medicaid waiver payments not rep | | | | | | + | |
| Trade or | e | Taxable dependent care benefits | | ` ' ' | , | | | + | |
| Business | f | Employer-provided adoption bene | | | | | | + | |
| Dusilless | g g | Wages from Form 8919, line 6. | | · | | | | + | |
| Attach | b h | Other earned income (see instruct | | | | | | + | |
| Form(s) W-2, | ï | Reserved for future use | | | | | | | |
| 1042-S, SSA-1042-S, | | Reserved for future use | | | | | . 1j | | |
| RRB-1042-S, | ı V | Total income exempt by a treaty fr | | | 1 1 | | , | _ | |
| and 8288-A | Α. | | | | | | | | |
| here. Also attach | z | Add lines 1a through 1h | | | <u>IK</u> | | . 1z | 1 | 937. |
| Form(s) | 2a | | 2a | 1 | able interest | | . 2b | + | |
| 1099-R if | | · | 3a | | dinary dividends . | | . 3b | + | |
| tax was | 4a | | 4a | | able amount | | | + | |
| If you did not | т а 5а | _ | та 5а | | able amount | | | + | |
| get a Form | 6 | Reserved for future use | | | | | | | |
| W-2, see | 7 | Capital gain or (loss). Attach Sche | | | | | | | |
| instructions. | 8 | Other income from Schedule 1 (Fo | | + | | | | | |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and | | + | 937. | | | | |
| | 10 | Add lines 12, 25, 35, 45, 35, 7, and Adjustments to income: | u u. 11115 15 | your total effectively C | | | . 3 | | |
| | а | From Schedule 1 (Form 1040), line | 26 | | 10a | | | | |
| | b | Reserved for future use | | | | | | | |
| | C | Reserved for future use | | | | | | | |
| | d | Enter the amount from line 10a. The | | | | | . 10d | 7 | |
| | 11 | Subtract line 10d from line 9. This | | + | 027 | | | | |
| | 12 | | - | | | | | + | 937. |
| | | Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions) | | | | | | | 12,950. |
| | 13a | Qualified business income deduct | | | | | | | |
| | b | Exemptions for estates and trusts | only (see i | instructions) | 13b | | | 4 | |
| | С | Add lines 13a and 13b | | | | | . 13c | | |
| | 14 | | | | | | | | 12,950. |
| | 15 | Subtract line 14 from line 11. If zer | ro or less. | enter -0 This is your ta | xable income | | . 15 | | 0. |

| Tax and | 16 | Tax (see instructions). Check if any from For | rm(s): 1 | 3814 2 [| 4972 | 2 3 | · 🗆 | | 16 | 0. |
|---|--|---|-------------------|-----------------|-----------|------------|---------------|---------------|---------|---------------------|
| Credits | 17 | Amount from Schedule 2 (Form 1040), line | 3 | | | | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | | | | | 18 | 0. |
| | 19 | Child tax credit or credit for other depende | ents from Sche | dule 8812 (F | 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 zero or less | s, enter -0 | | | | | | 22 | 0. |
| | 23a | Tax on income not effectively connected w | ith a U.S. trade | or business | from | | | | | |
| | | Schedule NEC (Form 1040-NR), line 15 | | | | 23a | | | | |
| | b | Other taxes, including self-employment ta | x, from Schedu | ıle 2 (Form 1 | 040), | | | | | |
| | | 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 total ta | x | | | | | | 24 | 0. |
| Payments | 25 | Federal income tax withheld from: | | | | | | | | |
| | а | Form(s) W-2 | | | | 25a | | 97. | | |
| | b | Form(s) 1099 | | | | 25b | | | | |
| | С | Other forms (see instructions) | | | . [| 25c | | | | |
| | d | Add lines 25a through 25c | | | | | | | 25d | 97. |
| | е | Form(s) 8805 | | | | | | | 25e | |
| | f | Form(s) 8288-A | | | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | | | 25g | |
| | 26 | 2022 estimated tax payments and amount | | | 1 | ٠., | | | 26 | |
| | 27 | Reserved for future use | | | | 27 | | | | |
| | 28 | Additional child tax credit from Schedule 8 | 3812 (Form 104 | 0) | | 28 | | | | |
| | 29 | Credit for amount paid with Form 1040-C | | | - t | 29 | | | | |
| | 30 | Reserved for future use | | | 1 | 30 | | | | |
| | 31 | Amount from Schedule 3 (Form 1040), line | | | | 31 | | | | |
| | 32 | Add lines 28, 29, and 31. These are your t | | | | | | | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. T | | | | | | | 33 | 97. |
| Refund | 34 | If line 33 is more than line 24, subtract line | | | | • | - | | 34 | 97. |
| | 35a | Amount of line 34 you want refunded to y | | | | | | | 35a | 97. |
| Direct deposit? See instructions. | b | Routing number 0 1 1 0 0 0 | | c Type | : X | Check | ing L | Savings | | |
| occ manactions. | d | d Account number 4 6 6 0 1 6 7 2 2 9 4 5 | | | | | | | | |
| | е | enter it here. | n address outs | ide the Unite | ed State | s not s | shown on | page 1, | _ | |
| | 36 | Amount of line 34 you want applied to yo | | | | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24. This is the an | | | | | | | | |
| You Owe | | For details on how to pay, go to www.irs.g | ov/Payments o | r see instruc | tions . | | | | 37 | |
| | 38 | Estimated tax penalty (see instructions) | | | | 38 | | | | <u>_</u> |
| Third | Do yo | u want to allow another person to discuss t | his return with t | the IRS? See | e instruc | ctions. | ∐ Y | es. Compl | ete bel | ow. 🛛 No |
| Party | Desig | nee's | Phon | е | | | | nal identifi | cation | |
| Designee | name | | | | | | | er (PIN) | Į. | |
| | | penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration | | | | | | | | |
| Sign | | | | | , | u on an | illioilliatic | | | ent you an Identity |
| Here | Yours | signature | Date | Your occu | apation | | | | | PIN, enter it here |
| пеге | | | | SOFTWA | RE | | | I | inst.) | |
| | Phone | e no. | Email address | | | | | 1, | | |
| Daid | | | 's signature | | | Date | | PTIN | | Check if: |
| Paid SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/18/2023 I | | | | | | P02082 | 2703 | Self-employed | | |
| Preparer | | name GLOBAL TAXES LLC | | | | | | Phone n | o. (6 | 78) 965-9522 |
| Use Only | Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E | | | | | | | | | 4-3171965 |

Form 1040-NR (2022)

Page 2

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

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

| 2022 | |
|--------------------------------------|--|
| Attachment Sequence No. 7B | |

OMB No. 1545-0074

Name shown on Form 1040-NR AAKRITI SAXENA

Your identifying number 096-27-5459

| | Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | (d) Other (specify) | | |
|--|--|---|----------------|----------|-----------------------|------------------------------|----------------------|---|---|
| | | | | (4) 1070 | | | (b) 1370 | % | % |
| 1 | Dividends and divide | end equivalents: | | | | | | | |
| а | Dividends paid by U | S. corporations | | 1a | | | | | |
| b | Dividends paid by fo | reign corporations | | 1b | | | | | |
| С | Dividend equivalent p | payments received with respect to section 871(m) to | transactions | 1c | | | | | |
| 2 | Interest: | | | | | | | | |
| а | Mortgage | | | 2a | | | | | |
| b | Paid by foreign corp | orations | | 2b | | | | | |
| С | Other | | | 2c | | | | | |
| 3 | Industrial royalties (p | atents, trademarks, etc.) | | 3 | | | | | |
| 4 | | copyright royalties | | 4 | | | | | |
| 5 | | rights, recording, publishing, etc.) | | 5 | | | | | |
| 6 | Real property incom | e and natural resources royalties | | 6 | | | | | |
| 7 | | ies | | 7 | | | | | |
| 8 | | fits | | 8 | | | | | |
| 9 | Capital gain from line | e 18 below | | 9 | | | | | |
| 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 | Residents of countries other than Canada. | | 11 | | | | | |
| 12 | | | | | | | | | |
| 12 | | | | 12 | | | | | |
| 10 | | 1 12 in columns (a) through (d) | | 13 | | | | + | - |
| 13 14 | _ | rate of tax at top of each column | | 14 | | | | | - |
| 15 | | ffectively connected with a U.S. trade or busines | | | through (d) of line 1 | / // Enter the total here | and on Form 10/0 |)-NR. line 23a 15 | - |
| 13 | rax on income not e | Capital Gains an | | | | | | -N11, IIIIe 25a 15 | |
| | nly the capital gains and from property sales or | 16 (a) Kind of property and description | (b) Date acq | | (c) Date sold | (d) Sales price | (e) Cost or | (f) LOSS | (g) GAIN |
| exchanges that are from sources within the United States and not | | (if necessary, attach statement of descriptive details not shown below) | mm/dd/yy | | mm/dd/yyyy | | other basis | If (e) is more than (d), subtract (d) from (e). | If (d) is more than (e), subtract (e) from (d). |
| busines | rely connected with a U.S. ss. Do not include a gain | | | | | | | | |
| | on disposing of a U.S. real y interest; report these | | | | | | | | |
| gains a | nd losses on Schedule D | | | | | | | | |
| (Form 1 | property sales or | | | | | | | | |
| exchan | ges that are effectively | | | | | | | 1 | |
| | eted with a U.S. business edule D (Form 1040), | 17 Add columns (f) and (g) of line 16 . | | | | | 17 | | |
| | 797, or both. | 18 Capital gain. Combine columns (f) and | (g) of line 17 | ∕. Ente | er the net gain he | re and on line 9 abo | ove. If a loss, ente | er -0 18 | |

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

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attachment Sequence No. **7C**

Your identifying number

| AAI | KRITI SAXENA | 096-27-5459 | | | | | | | | | |
|-----|---|---|---------------------------------------|------------------------------|-------------|--|--|--|--|--|--|
| 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 | 1. A U.S. citizen? | | | 🗌 Yes | ⊠ No | | | | | | |
| 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, | | | | | | | | | | |
| 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 stat | 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 concheck the box for Canada or Mexico and skip to item F | nmute to work in the | United States at frequer | nt intervals, Mexico | | | | | | | |
| | Date entered United States mm/dd/yy Date departed United State mm/dd/yy | es D | ate entered United States mm/dd/yy | Date departed Unite mm/dd/yy | ed States | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Н | Give number of days (including vacation, nonworkdays, and 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: | | | Yes | ⊠ No | | | | | | |
| J | Are you filing a return for a trust? | | | Yes | ⊠ No | | | | | | |
| | If "Yes," did the trust have a U.S. or foreign owner unde U.S. person, or receive a contribution from a U.S. person' | r the grantor trust ru? | les, make a distribution o | or loan to a | □No | | | | | | |
| K | Did you receive total compensation of \$250,000 or more | - | | | ⊠ No | | | | | | |
| | If "Yes," did you use an alternative method to determine t | | • | | ☐ No | | | | | | |
| L | Income Exempt From Tax—If you are claiming exempticomplete (1) through (3) below. See Pub. 901 for more inf | | | x treaty with a foreign | n country, | | | | | | |
| 1 | Enter the name of the country, the applicable tax treaty art amount of exempt income in the columns below. Attach For | | | laimed the treaty benef | it, and the | | | | | | |
| | (a) Country | (a) Country (b) Tax treaty article (c) Number of monticlaimed in prior tax ye | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 | | | | | | | | | |
| | 2. Were you subject to tax in a foreign country on any of the | | | Yes | ∐ No | | | | | | |
| 3 | 3. Are you claiming treaty benefits pursuant to a Competent | - | | ⊠Yes | ∐ No | | | | | | |
| | If "Yes," attach a copy of the Competent Authority determ | nination letter to your | return. | | | | | | | | |
| M | Check the applicable box if: | _ | | | | | | | | | |
| | This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See in | structions | | | \square | | | | | | |
| 2 | You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin | 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 | | | | | | | | | |