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

Internal Re	evenue Service Control of the latest mornation.				
Submis	sion Identification Number (SID) 22249620241020an1piq				
Taxpayer'	s name	Social secu	rity numb	per	
ROHA:	N SANJAY SHAHANE	789-3	-		
Spouse's				urity number	
Part I	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you	are au	thorizing.))
	hole dollars only on lines 1 through 5.				
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1	ı	
	Adjusted gross income		1		, 676.
	Total tax		2		<u>,625.</u>
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	32	<u>,794.</u>
	Amount you want refunded to you		4		
	Amount you owe		5	1	, 831.
Part I	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended				
to send for any of Agent to payment authorizate payment business taxes to personal	riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for relelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income federal taxes owed on this return and/or a payment of estimated tax, and the financial institutiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received as 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 identification number (PIN) below is my signature for the income tax return (original or amended) I at a Funds Withdrawal Consent.	ection of the J.S. Treasury dicated in the ion to debit the te the author quests must be processing payment. I fu	transmis and its of tax prepare entry fization. The be received the elurther according to the elury to the el	ssion, (b) the designated paration softo this accordor revoke (converted no late ectronic past should be showledge	e reason Financial tware for unt. This cancel) a er than 2 yment of that the
	er's PIN: check one box only	Г			
X	l authorize GLOBAL TAXES LLC to enter or generate	mv PIN └		5 7 6	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	, E		digits, but 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 methodow.				
Your sig	gnature ▶ Date ▶				
Spouse	e's PIN: check one box only				
	I authorize to enter or generate	mv PIN			as my
	ERO firm name	Ē		digits, but	,
	signature on the income tax return (original or amended) I am now authorizing.	(lon'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 methodow.				
Spouse	's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	/			
Part II	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 nter all ze	8 2 7 eros	1
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted 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 Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of I	nitting this re	turn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

E1040-NR 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	ı. 1–D	ec. 31, 2023, or other tax year beg	ginning		, 2023,	ending	,	20	instructions.
Your first name	and r	middle initial	Last na	me				1	entifying number ructions)
ROHAN SAN	JAY		SHAH.	ANE				789-	31-7576
Home address (numk	per and street). If you have a P.O.	box, see ins	tructions.					Apt. no.
15551 NE		· · · · · · · · · · · · · · · · · · ·							E311
City, town, or po	ost of	fice. If you have a foreign address	, also comp	lete spaces belo	W.		State		ZIP code
REDMOND		, o		·			WA		98052
Foreign country	nam	e	Foreign	province/state/	county			postal cod	
					•				
Filing Status Check only		⊠ Single						Est	ate 🗌 Trust
one box.									
Digital Assets		ny time during 2023, did you: (a) re rwise dispose of a digital asset (o						r (b) sell, e	
Dependents				(0) Danamala			(4) Ch	eck the box	if qualifies for (see inst.):
(see instructions):		(1) First name Last na	me	(2) Depender identifying nur		(3) Relationship to yo	ou Chi	ld tax credi	Credit for other dependents
		200110	-	, 5		(2) 12.22.20.00.00 10 90	-		
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2,	box 1 (see ir	nstructions)				. 1a	183,698.
Effectively	b	Household employee wages not	`	,				. 1b	
Connected	c	Tip income not reported on line	•	. ,				. 1c	
With U.S.	d	Medicaid waiver payments not re	,	•				. 1d	
Trade or	e	Taxable dependent care benefits	•	` ,		,		. 1e	
Business	f	Employer-provided adoption ber		•				. 1f	
Dusiness	g	Wages from Form 8919, line 6.		•				. 1g	
Attach	h	Other earned income (see instruc						. 1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	•						
SSA-1042-S,	i	Reserved for future use						. 1j	
RRB-1042-S,	k	Total income exempt by a treaty				tem I		,	
and 8288-A here. Also	ĸ	line 1(e)			0 1411), 1	1k			
attach	z	Add lines 1a through 1h						. 1z	183,698.
Form(s)	- 2а	Tax-exempt interest	2a	· · · · i	h Tax	able interest		. 2b	1,830.
1099-R if tax was	3a	Qualified dividends	3a	143.		linary dividends .		. 3b	148.
withheld.	4a	IRA distributions	4a	143.		able amount			110:
If you did not	5a	Pensions and annuities	5a			able amount			
get a Form	6	Reserved for future use							
W-2, see	7	Capital gain or (loss). Attach Sch					_		
instructions.	8	Additional income from Schedule	`	, ,		' '	_		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, a	•	•					185,676.
	10	Adjustments to income from Scl		-					100,070.
	10	. '	`	,,		e are your total auj t			
	11	Subtract line 10 from line 9. This							185,676.
	12	Itemized deductions (from Sch	-						100,010.
		deduction (see instructions)							13,850.
	13a	Qualified business income deduc					,	1.	
	b	Exemptions for estates and trust							
	C	Add lines 13a and 13b	• '	•				. 13c	1.
	14								13,851.
	15	Subtract line 14 from line 11. If z							171,825.
	. •	Sasadormio i ritorrimio i l'ill Z	J. J J. 1000, t		Jour ca.			. 13	

Form 1040-NR (2023)								Page 2
Tax and	16	Tax (see instructions). Check if any from	Form(s): 1 88	314 2	4972 3			16	34,625.
Credits	17	Amount from Schedule 2 (Form 1040), I	ine 3					17	0.
	18	Add lines 16 and 17						18	34,625.
	19	Child tax credit or credit for other depe	ndents from Sched	ule 8812 (Forn	n 1040) .			19	
	20	Amount from Schedule 3 (Form 1040), I	ine 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or l	ess, enter -0					22	34,625.
	23a	Tax on income not effectively connected Schedule NEC (Form 1040-NR), line 15			1 1				
	b	Other taxes, including self-employment	tax, from Schedul	e 2 (Form 104	0),				
		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	tax					24	34,625.
Payments	25	Federal income tax withheld from:							
	а	Form(s) W-2			. 25a	32	2,794.		
	b	Form(s) 1099			. 25b				
	С	Other forms (see instructions)			. 25c				
	d	Add lines 25a through 25c						25d	32,794.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments and amo	unt applied from 20)22 return				26	
	27	Reserved for future use			. 27				
	28	Additional child tax credit from Schedul	le 8812 (Form 1040)	. 28				
	29	Credit for amount paid with Form 1040-							
	30	Reserved for future use			. 30				
	31	Amount from Schedule 3 (Form 1040), I							
	32	Add lines 28, 29, and 31. These are you						32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32						33	32,794.
Refund	34	If line 33 is more than line 24, subtract I			•	=		34	
	35a	Amount of line 34 you want refunded t						35a	
Direct deposit?	b	Routing number X X X X X			☐ Check	· .	Savings		
See instructions.	d	Account number X X X X X							
	е	If you want your refund check mailed to							
		enter it here.							
	36	Amount of line 34 you want applied to	your 2024 estimat	ed tax	. 36				
Amount	37	Subtract line 33 from line 24. This is the	-						
You Owe		For details on how to pay, go to www.ir			1 1			37	1,831.
	38	Estimated tax penalty (see instructions)			. 38		0 1		▽ N -
Third	•	u want to allow another person to discus			istructions.		es. Compl		ow. 🗵 No
Party Designee	Desig		Phone				nal identifi	cation	
Designee	name	penalties of perjury, I declare that I have exam	no.				er (PIN)		i move kon nevel ned me ne ned
		they are true, correct, and complete. Declarati							
Sign	Your	signature	Date	Your occupa	ıtion		If the	IRS se	ent you an Identity
Here							Prote	ection F	PIN, enter it here
				SOFTWARE	E ENGIN	EER	(see	inst.)	
	Phone		Email address		15.		DTIL	П	
Paid	Prepa		rer's signature		Date		PTIN		Check if:
Preparer			M PRIYA RAM :	SAGAR GUP	TA 04/1	4/2024	P02082		Self-employed
Use Only		name GLOBAL TAXES LLC					Phone no	, -	78) 965-9522
	Firm's	address 245 ROONEY CT E	BRUNSWICK N	J 08816			Firm's El	N 8	4-3171965

BAA

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

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

2023	
Attachment Sequence No. 7B	

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number ROHAN SANJAY SHAHANE 789-31-7576 Enter **amount of income** under the appropriate rate of tax. See instructions.

Note we of leaves		Nature of Income		() 400/	(I) 450/	434-54	(d) Other (specify)			
		Nature of income			(a) 10%	(b) 15%	(c) 30%	%	%	
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) trans	nsactions	1c						
2	Interest:									
а	Mortgage			2a						
b	Paid by foreign corp	orations		2b						
С	Other			2c						
3	Industrial royalties (p	patents, trademarks, etc.)		3						
4	•	copyright royalties		4						
5		rights, recording, publishing, etc.)		5						
6		e and natural resources royalties		6						
7		ies		7						
8	•	fits		8						
9		e 18 below		9						
10	Gambling—Resident	ts of Canada only. Enter net income in column (c).								
а										
b	Losses	<u> </u>		10c						
11	Gambling - Resident	ts of countries other than Canada								
	Note: Enter winning:	s only. Losses aren't allowed		11						
12	Other (specify):									
				12						
13	•	n 12 in columns (a) through (d)		13						
14		rate of tax at top of each column		14						
15	Tax on income not e	ffectively connected with a U.S. trade or business.	Add colum	ns (a) t	through (d) of line 14	4. Enter the total her	e and on Form 1040	-NR, line 23a 15		
		Capital Gains and	Losses F	rom	Sales or Excha	inges of Proper	ty	1	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		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yy		(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).	
or loss	on disposing of a U.S. real y interest; report these									
gains a	nd losses on Schedule D									
(Form 1	040). property sales or									
exchan	ges that are effectively						<u> </u>			
	ted with a U.S. business edule D (Form 1040),									
	797, or both.	18 Capital gain. Combine columns (f) and (g)) of line 17	. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	er -0 18		

SCHEDULE OI (Form 1040-NR)

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

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name s	nown on Form 1040-NR				Your identifying n	umber		
ROHA	AN SANJAY SHAHANE				789-31-75	76		
Α	Of what country or countries w	vere you a citizen or nation	al during the tax ye	ar? INDIA				
В	In what country did you claim	residence for tax purpose	s during the tax ye	ar? United States				
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident)) of the 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 Ur	ited States?		[☐ Yes		
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rul	es 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 status) or U.S. immigration status?							
G	List all dates you entered and	left the United States durin	g 2023. See instruc	ctions.				
	Note: If you're a resident of C				ent intervals,			
	check the box for Canada or	Mexico and skip to item h	<u>1.</u> <u>.</u>	🗌 Canada	☐ Mexico			
	Date entered United States	Date departed United Stat	es	Date entered United State		ed United States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mr	m/dd/yy		
	02/04/2023	11/29/2023						
Н	Give number of days (including							
	2021 365	, 20223	54 , and	2023 298		.		
ı	Did you file a U.S. income tax	return for any prior year?.				⊠ Yes □ No		
	If "Yes," give the latest year ar	ia form number you filea:	1	L040NR				
J	Are you filing a return for a trus					☐ Yes		
	If "Yes," did the trust have a U.S. person, or receive a contr					☐ Yes ☐ No		
V	Did you receive total compens	•				Yes		
K	If "Yes," did you use an alterna							
L	Income Exempt From Tax—If			•				
-	complete (1) through (3) below				tax troaty with t	a foreign country,		
1.	Enter the name of the country,				claimed the trea	tv benefit, and the		
	amount of exempt income in th					.,,		
	(a) Cou	ntrv	(b) Tax treaty artic	cle (c) Number of month	ns (d) Amoi	unt of exempt		
	,	•	,	claimed in prior tax ye		current tax year		
_	(e) Total. Enter this amount or		-					
	2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above?							
3.	Are you claiming treaty benefit					_ Yes ⊠ No		
	If "Yes," attach a copy of the C	Competent Authority deterr	nination letter to yo	our return.				
М	Check the applicable box if:	aldan on alastice to the Ci-		anno de la contra di la disci di 1900.	ad Otatas "	asimali aciana a		
1.	This is the first year you are may with a U.S. trade or business u							
9	You have made an election in	` '						
۷.	States as effectively connected							
	Caro do chicotivoly confliction			(a). 000 mon donorio		· · · · <u> </u>		

Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Name(s) shown on return Your	Your taxpayer identification numb			
ROHAN SANJAY SHAHANE 78	89-31-7576			

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)
i				
- '				
ii				
iii				
iv				
V				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20) $$		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	6 5.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0	8 5.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	1.
10	Qualified business income deduction before the income limitation. Add lines 5 an	1 1	10	1.
11	Taxable income before qualified business income deduction (see instructions)	11 171,826.		
12	Enter your net capital gain, if any, increased by any qualified dividends			
	(see instructions)	12 143.		
13	Subtract line 12 from line 11. If zero or less, enter -0			
14	Income limitation. Multiply line 13 by 20% (0.20) \cdot		14	34,337.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also			
	the applicable line of your return (see instructions)		15	1.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater that		16	(0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a			
	zero, enter -0	<u> </u>	17	0.

Form 1040NR Lines 9 and 10

Interest and Dividend Income Statement

2023 Statement

Name(s) Shown on Return	Social Security Number
ROHAN SANJAY SHAHANE	789-31-7576

Part I - Interest Income

1	Payer's Name		Amount
•	FIDELITY		11.
	GOLDMAN SACHS BANK USA		1,819.
		• •	
			- <u> </u>
	···		-
2	Add the amounts entered above in Part I	2	1,830.
3	Excludable interest on series EE U.S. savings bonds issued after 1989.		
	Attach Form 8815 (not supported for 1040 NR)	3	
4	Subtract line 3 from line 2. Enter the result on Form 1040NR, line 9a · · · · · · · ▶	4	1,830.

Part II — Dividend Income

5	Payer's Name		Amount
•	FIDELITY BROKERAGE SERVICES LLC		148.
			·
	··		
	<u> </u>		
	<u> </u>		
	··		
6	Add the amounts entered above in Part II	6	148.

Interest and Dividends Summary • Keep for your records

Name(s) Shown on Return	Social Security Number
ROHAN SANJAY SHAHANE	789-31-7576
<u> </u>	

Interest Summary		Total Interest	Tax-Exempt	U.S. Government	Priv Actvy Bond			
1 2 3 4 5 6 7 8 9 10 11 12 13	Seller-financed mortgage From Schedule B, Part I From Schedule B, Part II From K-1 Worksheets Exempt-int.divs (net of adj.) . From Forms 6252 From Forms 8814 Less Adjustments: U.S. savings bond interest previously reported Nominee distribution OID adjustment ABP adjustment	1,830.						
14 15 16 17 18 19 20	Other adjustment	1,830.						
	Dividends Summary	Ordinary	Qualified	Capital Gains	Nontaxable			
1 2	From Schedule B From K-1 Worksheets	148.	143.					
3 4 5 6 7 8 9	Subtotal	148.	143.					
	Capital Gains Summary	28% rate	Sec. 1250	Sec. 1202 50%	Sec. 1202 60%			
1 2 3 4 5	From Schedule B							
	Capital Gains Summary	Sec. 1202 75%	Sec. 1202 100%					
1 2 3 4 5	From Schedule B Less Adjustments: Nominee distribution Other adjustment Total Adjustments							

Dividend Income Worksheet

Additional Information

	٠,	Shown on Return SANJAY SHAHANE	Social Security Number 789-31-7576					
Payer FIDELITY BROKERAGE SERVICES LLC								
A	1a 1b 1c 1d 2 3 4	ditional 1099-DIV information: Box 2c - Section 1202 gain eligible for 50% exclusion 1202 gain eligible for 60% exclusion (QS Section 1202 gain eligible for 75% exclusion on C Section 1202 gain eligible for 100% exclusion on Box 2d - Collectibles (28%) gain	B Empowerment Zone stock QSB stock QSB stock	()				
В	6 Box 11 - FATCA filing requirement							
	Federal							
	1	Federal income tax withheld						
	2	State State State State 3 State identification no.	State tax withhe	eld				
	3	I confirm that the state withholding identification n	umber(s) are accurate					
С	Exe 1 2	xempt-interest dividends: (included on line 2a of Form 1040 or 1040-NR Total exempt-interest dividends (do not include in box 1 or box 3) Private activity bond amount included in line C-1 above						
	4	State (postal code) for exempt-interest dividends						
D	Adj 1	djustment information: Select type of adjustment: N Nominee H Other D ESOP distribution						
	· · · · ·							
E	Ma 1	Margin interest expense for Form 4952: Margin interest paid						
F	For 1 2 3 4 5 6 7 8 9	reign tax information: All income is assumed passive. See Help. Box 7 - Foreign tax paid in U.S. dollars						
Additional Payer and Recipient Information								
Payer's TIN			Recipient's address and ZIP code Transfer address from Federal Information Wks . Street City					
State ZIP Code			State ZIP Code Foreign Country					
. 511	9.1							