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

Subm	ission Identification Number (SID)			
Taxpay	er's name	Social securit	y number	
DIV	YA OTURKAR	882-17-	-7210	
Spouse	s' name	Spouse's soci	al security n	umber
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	e authori	zing.)
Enter	whole dollars only on lines 1 through 5.	-		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	4,650.
2	Total tax		2	0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	434.
4	Amount you want refunded to you		4	434.
5	Amount you owe		5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and ke penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)			
return to send for any Agent payme author payme busine taxes persor	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial transmitter of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I around Financial Withdrawal Consent.	tter, or electroction of the trans. Treasury are cated in the tain to debit the the authorizatests must be processing of ayment. I furtile	nic return of ansmission and its design and its design and its preparation and its received r	originator (ERO), (b) the reason nated Financial on software for saccount. This voke (cancel) a no later than 2 unic payment of vledge that the
	ayer's PIN: check one box only			
\(\bar{\range} \)		nv PIN 7	7 2 1	as my
Ľ	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits 1't enter all z	s, but
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methology.			
Your	signature ▶ Date ▶			
Spour	se's PIN: check one box only			
Ороц	I authorize to enter or generate	ny DINI		as my
	ERO firm name	-	er five diaits	
	signature on the income tax return (original or amended) I am now authorizing.	dor	't enter all z	eros
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methodelow.			
Spous	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below			
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		6 0 8 er all zeros	2 7 1
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in accor	dance with the
FR∩'	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 2023 OMB No. 1545-0074

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

For the year Jan	n. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20		See separate nstructions.
Your first name	and i	middle initial	Last na	ame			Your id		ing number
							(see ins	tructio	ns)
DIVYA			OTUR	KAR			882-	17-	7210
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.					Apt. no.
7H, 10 HU									2
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP co	
JERSEY CI						NJ		073	<u> </u>
Foreign country	nam	e	Foreigr	n province/state/county		Foreign	postal co	de	
Filing	X	Single Married filing sepa	arately (N	MFS) Qualifyii	ng surviving spouse ((QSS)	☐ Es	tate	☐ Trust
Status	If	you checked the QSS box, enter the o	child's na	ame if the qualifying pers	son is a child but not	your dep	endent:		
Check only one box.									
	Δta	ny time during 2023, did you: (a) recei	ve (as a	reward award or navm	ent for property or se	rvices). o	r (h) sell	excha	nge or
Digital Assets		erwise dispose of a digital asset (or a f							Yes 🔀 No
Dependents						(4) Ch	eck the box	x if qual	lifies for (see inst.):
(see instructions):		(4) First areas		(2) Dependent's	(0) Deletieneleie te	Chi	ld tax cred	it '	Credit for other
		(1) First name Last name		identifying number	(3) Relationship to yo	ou			dependents
If more than four							-		
dependents, see							-		
instructions and check here								+	
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			 . 1a	1	1,710.
Effectively	b	Household employee wages not rep	`	,					
Connected	c	Tip income not reported on line 1a (s		` '					
With U.S.	d	Medicaid waiver payments not report		•					
Trade or	е	Taxable dependent care benefits fro							
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 1f		
	g	Wages from Form 8919, line 6					. 1g		
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .		<u> </u>		. 1h		
1042-S,	i	Reserved for future use			1i				
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	n Sched	ule OI (Form 1040-NR), i	tem L,				
here. Also		line 1(e)			1k				
attach Form(s)	Z	Add lines 1a through 1h	- 1	1			. 1z		1,710.
1099-R if	2a	Tax-exempt interest 2a			cable interest		. 2b		
tax was	_	Qualified dividends 3a			dinary dividends .		. 3b		
withheld.	4a	IRA distributions 4a			cable amount				
If you did not get a Form	5a 6	Pensions and annuities 5a			cable amount				
W-2, see	6 7	Reserved for future use				_			
instructions.	8	Additional income from Schedule 1	•		•				2,940.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8							4,650.
	10	Adjustments to income from Sched		•					1,0001
		income	•		•				
	11	Subtract line 10 from line 9. This is y							4,650.
	12	Itemized deductions (from Schedu							
		deduction (see instructions)							13,850.
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts or	nly (see i	instructions)	13b				
	С	Add lines 13a and 13b					. 130	:	
	14								13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income .		. 15		0.

Tax and	16	Tax (see instructions). Check if any from	Form(s): 1	3 14 2 🗌 497	2 3 🗌	1	6 0.
Credits	17	Amount from Schedule 2 (Form 1040), I	ine 3			1	7 0.
	18	Add lines 16 and 17				1	8 0.
	19	Child tax credit or credit for other depe	ndents from Sched	ule 8812 (Form 10	40)	1	9
	20	Amount from Schedule 3 (Form 1040), I	ine 8			2	.0
	21	Add lines 19 and 20					:1
	22	Subtract line 21 from line 18. If zero or l	ess, enter -0			2	0.
	23a	Tax on income not effectively connected			1		
		Schedule NEC (Form 1040-NR), line 15			23a		
	b	Other taxes, including self-employment line 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			2	0.
Payments	25	Federal income tax withheld from:					
•	а	Form(s) W-2			25a	23.	
	b	Form(s) 1099			25b	411.	
	С	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				25	5d 434.
	е	Form(s) 8805					5e
	f	Form(s) 8288-A					5f
	g	Form(s) 1042-S					
	26	2023 estimated tax payments and amo					
	27	Reserved for future use			27		
	28	Additional child tax credit from Schedul			28		
	29	Credit for amount paid with Form 1040-	•	,	29		
	30	Reserved for future use			30		
	31	Amount from Schedule 3 (Form 1040), I			31		
	32	Add lines 28, 29, and 31. These are you					2 424
D. (33	Add lines 25d, 25e, 25f, 25g, 26, and 32					434.
Refund	34	If line 33 is more than line 24, subtract I			•		434.
	35a	Amount of line 34 you want refunded t					5a 434.
Direct deposit? See instructions.	b	Routing number 0 2 1 2 0		c Type:	Checking 🔼	Savings	
	d	Account number 3 9 6 9 3					
	е	If you want your refund check mailed to	o an address outsic	le the United State	es not shown on	page 1,	
		enter it here.					
	36	Amount of line 34 you want applied to			36		
Amount	37	Subtract line 33 from line 24. This is the	-				
You Owe		For details on how to pay, go to www.ir				3	7
	38	Estimated tax penalty (see instructions)			38		
Third	•	u want to allow another person to discus				es. Complete	
Party Designee	Desig name		Phone no.			nal identificati er (PIN)	on
-		penalties of perjury, I declare that I have exam they are true, correct, and complete. Declarati	ined this return and a				
Sign	Vour	signature	Date	Your occupation		lifthe IR	S sent you an Identity
Here	i oui .	signature	Date	Tour occupation			on PIN, enter it here
11616				GRADUATE A	SSISTANT.	(see inst	·
	Phone	e no.	Email address				
Doid		·	rer's signature		Date	PTIN	Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA SYAN	1 PRIYA RAM	SAGAR GUPTA	03/27/2024	P0208270	3 Self-employed
Preparer		sname GLOBAL TAXES LLC			, -, ,		(678) 965-9522
Use Only		address 245 DOONEY OF E	DDIINQWTCV VI	T 00016		Firm's FIN	10,01,000 0022

Form 1040-NR (2023)

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

DIVYA OTURKAR

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 882-17-7210

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
	Other income. List type and amount: Other Income from box 3 of 1099-Misc 2,940.	8z 2,940.		
9	Total other income. Add lines 8a through 8z		9	2,940.
10	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	2,940.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr	nent		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction	🗀	17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		9a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use	_	22	
23	Archer MSA deduction	🔯	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	-		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and			
	Form 1040, 1040-SR, or 1040-NR, line 10	:	26	

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number DIVYA OTURKAR 882-17-7210 Enter **amount of income** under the appropriate rate of tax. See instructions.

			Nature of Income	1a	(b) 15%	(c) 30%	(d) Other	(specify)		
			14dtale of moonic				(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign (corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m)	transactions	1c					
2	Interest:	•								
а	Mortgage				2a				!	
b			18		2b					
С					2c					
3					3					
4			i i i i i i i i i i i i i i i i i i i		4					
5	•		-		5					
6			natural resources royalties		6					
7										
8				8						
9	· · · · · · · · · · · · · · · · · · ·			9						
10	Gambling-Resident	s of C	anada only. Enter net income in column (c).						
	If zero or less, enter								!	
a	Winnings				40-				!	
b	Losses	o of o	· · · · · · · · · · · · · · · · · ·		10c				-	
11	Note: Enter winnings	s only.	Losses aren't allowed		11				!	
12										
					12				!	
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busine	ss. Add colum	nns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040-	-NR, line 23a 15	
			Capital Gains an	nd Losses F	From	Sales or Excha	inges of Proper	ty		
losses f	nly the capital gains and from property sales or ges that are from sources he United States and not	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).
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),								()	
	797, or both.	18	Capital gain. Combine columns (f) and	l (g) of line 17	7. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	r -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

2. A green card holder (lawful permanent resident) of the United States? Yes N If you answer Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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, 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? Yes Yes N If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico and Skip to item H N Canada Mexico Date entered United States Date departed United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States Date entered United States Date departed United States Mexico Date entered United States Date departed United States Date entered United States Date departed United States Mexico Date entered United States Date departed United States Date entered United States Date departed United States Date entered	Name s	hown on Form 1040-NR				Your identifying	number				
Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Yes	DIV	YA OTURKAR				882-17-72	10				
B In what country did you claim residence for tax purposes during the tax year? United States C Have you ever applied to be a green card holder (awful permanent resident) of the United States? Yes	Α	Of what country or countries w	vere you a citizen or nation	al during the tax yea	ar? INDIA						
Have you ever applied to be a green card holder (lawful permanent resident) of the United States?	В	In what country did you claim	residence for tax purpose	s during the tax yea	r? United States						
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, for expatriation rules that apply to you. 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 Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? If you answered "Yes," indicate the date and nature of the change: It stall dates you entered and left the United States during 2023. 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 entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date entered United States during: 365 and 2023 365 I Did you file a U.S. income tax return for any prior year? Jess Marey ou filing a return for a trust? Jess Marey if "Yes," give the latest year and form number you filed: 10.40NR Jess Marey if the states was an afternative method to determine the source of this compensation? Yes Marey if "Yes," did you use an alternative method to determine the source of this compensation? Jess Marey if the analytic mare method to determine the source of this compensation? Lincome Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign cour complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months claimed in prior tax year income in curren	С	Have you ever applied to be a	green card holder (lawful p	ermanent resident)	of the United States? .		☐ Yes	⊠ No			
2. A green card holder (lawful permanent resident) of the United States? Yes N If you answer Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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, 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? Yes Yes N If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico and Skip to item H N Canada Mexico Date entered United States Date departed United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States mm/dd/yy Date entered United States Date departed United States Date entered United States Date departed United States Mexico Date entered United States Date departed United States Date entered United States Date departed United States Mexico Date entered United States Date departed United States Date entered United States Date departed United States Date entered	D	Were you ever:									
If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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 2023. 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	1.	A U.S. citizen?					☐ Yes	⊠ No			
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. F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?	2.	A green card holder (lawful per	rmanent resident) of the Ur	ited States?			☐ Yes	⊠ No			
F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes M f you answered "Yes," indicate the date and nature of the change:		If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rule	es that apply to you.						
F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?	E					•					
List all dates you entered and left the United States during 2023. 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	F	Have you ever changed your v If you answered "Yes," indicat	risa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immigra	ation status?		☐ Yes	⊠ No			
check the box for Canada or Mexico and skip to item H	G	G List all dates you entered and left the United States during 2023. See instructions.									
Date entered United States mm/dd/yy Date entered United States mm/dd/yy Date departed United States mm/dd/yy Date Date Date Date Date Date Date Date						ent intervals,					
H Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2021		check the box for Canada or	Mexico and skip to item I	<u>! .</u> <u>.</u>	🗌 Canada	Mexico					
H Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2021 , 2022 365 , and 2023 365 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: 1040NR J Are you filing a return for a trust? If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person? K Did you receive total compensation of \$250,000 or more during the tax year? L Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign cour complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt income in current tax year				es				d States			
2021 , 2022 365 , and 2023 365 . I Did you file a U.S. income tax return for any prior year?		mm/dd/yy	mm/dd/yy		mm/dd/yy	m	ım/dd/yy				
2021 , 2022 365 , and 2023 365 . I Did you file a U.S. income tax return for any prior year?											
2021 , 2022 365 , and 2023 365 . I Did you file a U.S. income tax return for any prior year?											
2021 , 2022 365 , and 2023 365 . I Did you file a U.S. income tax return for any prior year?											
2021 , 2022 365 , and 2023 365 . I Did you file a U.S. income tax return for any prior year?											
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: J Are you filing a return for a trust? If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person? K Did you receive total compensation of \$250,000 or more during the tax year? If "Yes," did you use an alternative method to determine the source of this compensation? L Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign cour complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years income in current tax years income in current tax years.	Н	• ,			•	•					
If "Yes," give the latest year and form number you filed: J Are you filing a return for a trust?		2021	, 20223	65 , and :	2023 365	·	S				
Are you filing a return for a trust?	I	Did you file a U.S. income tax	return for any prior year? .				× Yes	⊔ No			
If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person?		if "Yes," give the latest year ar	na form number you filea:	1	040NR						
U.S. person, or receive a contribution from a U.S. person?	J						⊔ Yes	ĭX No			
Did you receive total compensation of \$250,000 or more during the tax year?							□ v				
If "Yes," did you use an alternative method to determine the source of this compensation?	V	·	·								
Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign cour complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years	N	-		-				□ No			
complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years.											
1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years	-					tax treaty with	a loreign	country,			
amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax years	1.	- · · · · · · ·				claimed the tre	atv benefi	t and the			
(a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years (d) Amount of exempt income in current tax years							, 20	.,			
claimed in prior tax years income in current tax year						ns (d) Amo	ount of exe	empt			
		(4, 55%	,	(2) ran in oary an ino.		-		•			
(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1				-							
		-					∐ Yes	∐ No			
	3.	, 5,									
If "Yes," attach a copy of the Competent Authority determination letter to your return.			Competent Authority detern	nination letter to you	ur return.						
M Check the applicable box if:											
1. This is the first year you are making an election to treat income from real property located in the United States as effectively connect with a U.S. trade or business under section 871(d). See instructions	1.							onnected \square			
2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the Un	2.	You have made an election in	n a previous year that has	not been revoked,	to treat income from re	al property loc	ated in th	ne United			
			d with a U.S. trade or busin								