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 n	leveliue Selvice										
Submis	ssion Identification Number (SID)										
Taxpayer	r's name		Social	securit	y numb	er					
PRAN	IITHA KARNE		360-55-5157								
Spouse's			Spouse's social security number								
D. 1	To Date of Constituting To Man Falling December 24	/E . I .					• • • •				
Part		(Enter	year y	ou a	re aut	noriz	zing.)				
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.										
	Adjusted gross income				1 1		54.	207.			
	Total tax				2			625.			
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3			064.			
	Amount you want refunded to you				4			439.			
	Amount you owe				5						
Part I		t and k	еер а	copy	y of y	our	retur	n)			
return (o to send for any o Agent to payment authorize payment business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Par original or amended) I am now authorizing. I consent to allow my intermediate service provider, my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasor delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ration is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the true to the treatment of the payment (settlement) date. I also authorize the financial institutions involve to receive confidential information necessary to answer inquiries and resolve issues related the lidentification number (PIN) below is my signature for the income tax return (original or amendic Funds Withdrawal Consent.	transmin for rejecte the U. bunt indicinstitution required in the to the p	tter, or ction of S. Treascated in to del the autests mests ayment.	electro the tra sury ar the ta oit the thoriza ust be sing of I furt	enic retuents ansmissed its distance of the entry to attion. To receive the elements and the elements are th	urn or sion, esign aratio this o reversed no ectron	iginato (b) the ated F in soft accou oke (ci o later ic pay edge i	or (ERO) reason			
	yer's PIN: check one box only										
X	I authorize GLOBAL TAXES LLC to enter or ge	nerate r	nv PIN	5	5 1	5	7	as my			
•••	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	norato i	,	Ent	er five on't enter			ao my			
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PII below.										
Your si	gnature ▶ Da	ite▶_									
Spouse	e's PIN: check one box only										
Spouse	I authorize to enter or ge	nerate r	my DINI					as my			
	ERO firm name	ileiale i	ily i ilv		er five o	liaits.	but but	as my			
	signature on the income tax return (original or amended) I am now authorizing.				n't enter						
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PII below.										
Spouse	e's signature ▶ Da	ıte ▶									
	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.	2 2	2 4	9 6	6 0	8 2	2 7	1			
			Do	n't ente	er all zei	ros					
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual in red to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I aments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providence.	m subm	itting th	is retu	rn in a	ccord	lance v				
ERO's	signature ▶ Da	ite ▶									
	ERO Must Retain This Form — See Instruction	ons									
	Don't Submit This Form to the IRS Unless Requeste		o 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 Jar	n. 1–D	ec. 31, 2023, or other tax year beginn	ning, , 2023, ending, , 20						See separate instructions.	
Your first name	and i	niddle initial	Last na	ıme		our identifying number ee instructions)				
PRANITHA				E			360-	360-55-5157		
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.		
6621 W 14	OTH	ST							1608	
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP c	ode	
OVERLAND	PAR	K				KS		662	23	
Foreign country name Foreign province/state/county Foreign pos								de		
Filing Status Single								tate	☐ Trust	
Check only one box.										
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					r (b) sell,			
Dependents						(4) Ch	eck the bo	the box if qualifies for (see		
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(2) Polationship to ve	Chil	d tax cred	it	Credit for other	
		(1) First Harrie Last Harrie		identifying number	(3) Relationship to you				dependents	
If more than four										
dependents, see										
instructions and check here							\exists			
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. la		54,207.	
Effectively	b	Household employee wages not rep	`	,					31,2371	
Connected	c	Tip income not reported on line 1a (s		. ,						
With U.S.	d	Medicaid waiver payments not report		*						
Trade or	e	Taxable dependent care benefits fro		, , ,	•		. 1e			
Business	f	Employer-provided adoption benefit		*			. 1f			
240000	g	Wages from Form 8919, line 6	. 1g							
Attach	h	Other earned income (see instruction	. 1h							
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use					. 1 j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)								
attach	z	Add lines 1a through 1h	. 1z		54,207.					
Form(s) 1099-R if	2a	Tax-exempt interest 2a	. 2b							
tax was	3a	Qualified dividends 3a	1	b Ord	inary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	b Taxable amount							
If you did not	5a	Pensions and annuities 5a	. 5b							
get a Form W-2, see	6	Reserved for future use	_							
instructions.	7	Capital gain or (loss). Attach Schedu	•		•			+		
	8	Additional income from Schedule 1		-						
	9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income							+	54,207.	
	10	Adjustments to income from Sched income					. 10			
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income			. 11	_	54,207.	
	12	Itemized deductions (from Schedu deduction (see instructions)							13,850.	
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995-						
	b	Exemptions for estates and trusts or	nly (see i	nstructions)	13b					
	С	Add lines 13a and 13b						:		
	14								13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta x	cable income .		. 15		40,357.	

Form 1040-NR (2023)										Page 2	
Tax and	16	Tax (see instructions). Check if any f	rom For	m(s): 1	314 2	4972	2 3			16	4,625.	
Credits	17	Amount from Schedule 2 (Form 104	40), line	3						17	0.	
	18	Add lines 16 and 17								18	4,625.	
	19	Child tax credit or credit for other d	epende	ents from Sched	ule 8812 (F	orm 104	lO) .			19		
	20	Amount from Schedule 3 (Form 104	40), line	8						20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If zero	or less	s, enter -0			٠.,			22	4,625.	
	23a	Tax on income not effectively conne Schedule NEC (Form 1040-NR), line					23a					
	b	Other taxes, including self-employr line 21		•	•	′	23b					
	С	Transportation tax (see instructions	s)			. [23c					
	d	Add lines 23a through 23c								23d		
	24	Add lines 22 and 23d. This is your t	total tax	k						24	4,625.	
Payments	25	Federal income tax withheld from:										
-	а	Form(s) W-2					25a		7,064.			
	b	Form(s) 1099					25b					
	С	Other forms (see instructions) .				. [25c					
	d	Add lines 25a through 25c								25d	7,064.	
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2023 estimated tax payments and a	amount	applied from 20	22 return .					26		
	27	Reserved for future use					27					
	28	Additional child tax credit from Sch	edule 8	812 (Form 1040))		28					
	29	Credit for amount paid with Form 1					29					
	30	Reserved for future use					30					
	31	Amount from Schedule 3 (Form 1040), line 15										
	Add lines 28, 29, and 31. These are your total other payments and refundable credits											
	33	Add lines 25d, 25e, 25f, 25g, 26, ar								33	7,064.	
Refund	34	If line 33 is more than line 24, subtr					-	-		34	2,439.	
	35a	Amount of line 34 you want refund								35a	2,439.	
Direct deposit? See instructions.	b	Routing number 1 0 1 1										
occ mondonons.	d	Account number 5 1 8 0										
	е	e If you want your refund check mailed to an address outside the United States not shown on page 1,										
		enter it here.				1	1					
	36	Amount of line 34 you want applied					36					
Amount	37	Subtract line 33 from line 24. This is		-		etione				37		
You Owe	20	For details on how to pay, go to www.irs.gov/Payments or see instructions										
Third		38 Estimated tax penalty (see instructions)									low. 🗵 No	
Party	•	·	อบนออ แ			e instruc	,110113.				iow.	
Designee	Designee's Phone Personal identifiname no. number (PIN)								ication			
	Under	penalties of perjury, I declare that I have ethey are true, correct, and complete. Decl		this return and ac				statement	ts, and to th			
Sign	Your	signature	I	Date	Your occi	upation			If th	e IRS s	ent you an Identity	
Here	J.g			Tour occupation			Prot	ection	PIN, enter it here			
				IT EME	PLOYE	E		(see	inst.)			
	Phone			Email address		-			1 5-			
Paid	Prepa	rer's name	reparer'	s signature			Date		PTIN		Check if:	
Preparer			YAM PR	IYA RAM SAGAF	R GUPTA T	ALLAM	02/1	0/2024	P0208		Self-employed	
Use Only		sname GLOBAL TAXES LL								Phone no. (678)965-9522		
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E							IN 8	4-3171965			

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 PRANITHA KARNE 360-55-5157 Enter **amount of income** under the appropriate rate of tax. See instructions.

		or the app	riophate rate of taxt occ metractions.						/ n ou	/ '()
Nature of Income					(a) 10%	(b) 15%	(c) 30%	(a) Other	(specify)	
1	Dividends and divide	end equiv	alents:						76	/0
· a	Dividends paid by U.	•			1a					
b	•	nds paid by foreign corporations							+	
c		-	received with respect to section 871(r		1c				+	
2	Interest:	aymonto	received with respect to section of T(ny transastions					+	
a										
b					2a 2b				+	
c					2c				+	
3			ademarks, etc.)		3				+	
4	. "		t royalties		4				+	
5	·		cording, publishing, etc.)		5				+	
6		_	ural resources royalties		6				+	
7					7					
8					8					
9			W		9					
10										
а	Winnings									
b	Losses		-		10c					
11	Gambling - Resident	ts of cour	- ntries other than Canada		11					
10	Other (specify):	s only. Lo	sses aren't allowed						+	
12	Other (specify).				12					
13	Add lines 1e through		lumns (a) through (d)		13				+	
14	•		x at top of each column		14				_	
15			connected with a U.S. trade or busi			through (d) of line 1	1 Enter the total here	and on Form 1040)-NR. line 23a 15	
	Tax on income not e	Hechvery					anges of Proper		-INIT, IIII e Zoa IO	
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real			(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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).
	ty interest; report these and losses on Schedule D 1040).									
Report	property sales or								+	
	nges that are effectively eted with a U.S. business	17 ^~	d columns (f) and (g) of line 16 .					17	1	
on Schedule D (Form 1040), Form 4797, or both.			o columns (f) and (g) of line 16				re and on line 9 abo			

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Your identifying number

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

Attachment Sequence No. **7C**

OMB No. 1545-0074

PF	RAN	ITHA KARNE				360-55-5157						
Α		Of what country or countries w	vere you a citizen or nationa	al during the tax yea	r? 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.	. A U.S. citizen?										
	2.	2. A green card holder (lawful permanent resident) of the United States?										
		If you answer "Yes" to (1) or (2)	•				⊠ No					
Ε		If you had a visa on the last of				r vour U.S.						
		immigration status on the last day of the tax year $-\pi$ 1										
F		Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
•		If you answered "Yes," indicate					<i>-</i> 110					
G		List all dates you entered and I	left the United States durin	a 2023 See instruct	 ions							
Ğ		Note: If you're a resident of C		•		nt intervals						
		check the box for Canada or				Mexico						
		Date entered United States	Date departed United State		Date entered United States	Date departed Unite	nd Ctatas					
		mm/dd/yy	mm/dd/yy	es L	mm/dd/yy	mm/dd/yy						
		,	·, j j									
				\dashv								
н		Give number of days (including	vecation negworkdove and	d portiol days) you wa	ero procent in the United St	atas durina:						
п		• •	- · · · · · · · · · · · · · · · · · · ·		•	•						
		2021	roturn for any prior year?	, and 2	.023	× Yes	□No					
ı							□ NO					
		If "Yes," give the latest year an Are you filing a return for a trus	a ionii namber you mea	<u></u>	J4UNK		⊠ No					
J		If "Yes," did the trust have a l					INO					
		U.S. person, or receive a contr					☐ No					
Κ		Did you receive total compens	·				□ No No					
ĸ		If "Yes," did you use an alterna					□ No					
L		Income Exempt From Tax—If										
-		complete (1) through (3) below				ix treaty with a loreig	ii country,					
	1.	Enter the name of the country,				laimed the treaty bene	fit, and the					
		amount of exempt income in th	e columns below. Attach Fo	orm 8833 if required.	See instructions.							
		(a) Cou	ntry	(b) Tax treaty article		1 ,						
					claimed in prior tax year	rs income in current	tax year					
			E 4040 115 11 11 = 1		1							
	_	(e) Total. Enter this amount or		-								
		Were you subject to tax in a fo				<u> </u>	∐ No					
	3.	Are you claiming treaty benefit		-		⊔Yes	⊠ No					
		If "Yes," attach a copy of the C	competent Authority detern	nination letter to you	ır return.							
М		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 effectivith a U.S. trade or business under section 871(d). See instructions												
	2											
	۷.	You have made an election in States as effectively connected				property located in t	\square					