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	nission Identification Number (SID)				
Taxpay	rer's name	Social securit	ocial security number		
SHA	SHANK KARNE	278-67-4984			
Spouse	e's name	Spouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re auth	norizing.)	
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		482.
2	Total tax		2	3,	095.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	4,	107.
4	Amount you want refunded to you		4	1,	012.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of yo	our returr	<u>1)</u>
return to sen for any Agent payme author payme busine taxes persor	consense and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit of my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y 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 institution account indicated in the financial information 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 requires 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 penal identification number (PIN) below is my signature for the income tax return (original or amended) I aronic Funds Withdrawal Consent.	tter, or electroction of the tr S. Treasury areated in the te n to debit the the authorizatests must be processing of ayment. I furt	onic retu ansmiss nd its de ax prepa entry to ation. To receive the ele- her ack	arn originato sion, (b) the esignated Fi aration softv this accou o revoke (ca ed no later ctronic payn nowledge t	or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the
	ayer's PIN: check one box only				
	I authorize GLOBAL TAXES LLC to enter or generate	nv PIN $\frac{1}{2}$	4 9		as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		igits, but all zeros	ao,
	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 methodolow. Signature ► Date ►	od. The ERC) must	complete	
Your	signature ►	02/1	1/20	24	
Spou	se's PIN: check one box only				
	I authorize to enter or generate	nv PIN			as my
_	ERO firm name	_	er five d	igits, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter	all zeros	
	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.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	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 Don't enter		8 2 7 os	1
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income ta rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	ırn in ac	cordance v	
EDO'	o cianaturo N				
ERU'S	S signature ► Date ► ERO Must Retain This Form — See Instructions				
	ENU IVIUSI NEIZIII IIIIS FOITII — See IIISITUCTIONS				

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	ı. 1–C	Dec. 31, 2023, or other tax year begin	ning	, 2023,	ending		, , ;	20	See separate instructions.	
Your first name and middle initial								Your ider	ntifying number	
							(see instructions)			
SHASHANK			KARN	ΙE				278-6	7-4984	
Home address (num!	ber and street). If you have a P.O. box	k, see ins	structions.					Apt. no.	
3400 KENT	AV	E N308								
City, town, or po	ost o	ffice. If you have a foreign address, a	so comp	olete spaces below.		8	State	Z	IP code	
METAIRIE							LA		0006	
Foreign country	nam	e	Foreig	n province/state/county		F	oreign p	ostal code)	
Filing	X	Esta	te 🗌 Trust							
Status	If	Single Married filing sep you checked the QSS box, enter the		· · · · · · · · · · · · · · · · · · ·	son is a child	but not y	our depe	ndent:		
Check only one box.										
	۸+ ۵	nu time during 2002 did yeur (a) rece	ivo (00 0	remark entered or polyno	ant for near		::aaa\: a=	/b) aall av	rahanga ar	
Digital Assets		ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a						(b) sell, ex		
Dependents	1								qualifies for (see inst.):	
(see instructions):	1			(2) Dependent's			1	I tax credit	Credit for other	
(0000 001.00).	(1) First name Last name			identifying number	(3) Relation	(3) Relationship to you		Tiax Credit	dependents	
If more than four							_		<u> </u>	
dependents, see										
instructions and check here							-	<u> </u>		
	4-	Total amount from Form(s) W 2 ha	. 1 (222	inate sations)				1.1	41,482.	
Income	1a	Total amount from Form(s) W-2, bo Household employee wages not rep	`	,				1a 1b	41,402.	
Effectively Connected	b c	Tip income not reported on line 1a		` '				1c		
With U.S.	d	Medicaid waiver payments not repo	`	,				1d		
Trade or	e	Taxable dependent care benefits fro		` '	,			1e		
Business	f	Employer-provided adoption benefit		•				1f		
Dusiness	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			li					
SSA-1042-S,	j	Reserved for future use						1j		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fro								
here. Also		line 1(e)			1k	(
attach	Z	Add lines 1a through 1h						1z	41,482.	
Form(s) 1099-R if	2a	Tax-exempt interest 2		b Tax	kable interes	t		2b		
tax was	3a	Qualified dividends 3			dinary divide			3b		
withheld.	4a	IRA distributions 4			kable amoun					
If you did not get a Form	5a		а		kable amoun					
W-2, see	6	Reserved for future use								
instructions.	7 8	Capital gain or (loss). Attach Sched								
	9	Additional income from Schedule 1 (Form 1040), line 10							41,482.	
		Adjustments to income from Sched		-					41,402.	
	10									
	11	income							41,482.	
	12	Itemized deductions (from Sched		,						
	_	deduction (see instructions)		13,850.						
	13a	Qualified business income deduction			1	1			-	
	b	Exemptions for estates and trusts of	nly (see	instructions)	13	b				
	С	Add lines 13a and 13b						13c		
	14							14	13,850.	
	15	Subtract line 1/1 from line 11 If zero	or loce	enter _O_ This is your to	vahla inaan	10		15	27 632	

Form 1040-NR (2023)							Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2	4972	3			16	3,095.	
Credits	17	Amount from Schedule 2 (Form 1040), line 3					17	0.	
	18	Add lines 16 and 17					18	3,095.	
	19	Child tax credit or credit for other dependents from Schedule 8812 (Fo	orm 1040	0) .			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, enter -0					22	3,095.	
	23a	Tax on income not effectively connected with a U.S. trade or business schedule NEC (Form 1040-NR), line 15		23a					
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 10	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 tax					24	3,095.	
Payments	25	Federal income tax withheld from:							
-	а	Form(s) W-2		25a		4,107.			
	b	Form(s) 1099		25b					
	С	Other forms (see instructions)	. <u>L</u>	25c					
	d	Add lines 25a through 25c					25d	4,107.	
	е	Form(s) 8805					25e		
	f	Form(s) 8288-A					25f		
	g	Form(s) 1042-S					25g		
	26	2023 estimated tax payments and amount applied from 2022 return .					26		
	27	Reserved for future use		27					
	28	Additional child tax credit from Schedule 8812 (Form 1040)		28					
	29	Credit for amount paid with Form 1040-C		29					
	30	Reserved for future use		30					
	31	Amount from Schedule 3 (Form 1040), line 15		31					
	32	Add lines 28, 29, and 31. These are your total other payments and re					32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total paymen					33	4,107.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the a		-	-		34	1,012.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached				L	35a	1,012.	
Direct deposit?	b	Routing number 0 2 1 1 0 0 3 6 1 c Type:	: 📈 C	Checki	ng ု L	Savings			
See instructions.	d	Account number 7 9 1 1 6 1 8 0 2							
	е	If you want your refund check mailed to an address outside the United	d States	s not s	hown o	n page 1,			
		enter it here.							
	36	Amount of line 34 you want applied to your 2024 estimated tax .		36					
Amount	37	Subtract line 33 from line 24. This is the amount you owe .							
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instruct	1				37		
	38	Estimated tax penalty (see instructions)		38				ow. 🗵 No	
Third	,	u want to allow another person to discuss this return with the IRS? See	Instruct	tions.		es. Compl		ow. 🔼 No	
Party Designee	Desig		cation						
Designee	name	penalties of perjury, I declare that I have examined this return and accompanying				er (PIN)	a b aat a	f my lengueladas and	
		they are true, correct, and complete. Declaration of preparer (other than taxpayer)							
Sign	Yours	signature Date Your occup	nation			If the	RS s	ent you an Identity	
Here	, our c	Signature Date Tour books	pation					PIN, enter it here	
		NETWORK	K ENG	SINE	ER	(see	inst.)		
	Phone								
Paid	Prepa	rer's name Preparer's signature		Date		PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TA	ALLAM	02/1	1/2024	P02082	2703	Self-employed	
Use Only	Firm's	ame GLOBAL TAXES LLC Ph				Phone n	none no. (678) 965-9522		
Use Unity	Firm's	saddress 245 ROONEY CT E BRUNSWICK NJ 08816				Firm's E	N 8	4-3171965	

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SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

SHASHANK KARNE

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

Your identifying number

278-67-4984

Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings ______ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 Multiply line 13 by rate of tax at top of each column 14 15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a Capital Gains and Lossos From Salas or Evolundes of Property

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. rea property interest; report these gains and losses on Schedule D (Form 1040).

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). Form 4797, or both.

16	 (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).
1	Add columns (f) and (g) of line 16 . Capital gain. Combine columns (f) and	(g) of line 17. Ente				r-0 18	

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SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Internal Revenue Service Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name	shown on Form 1040-NR	Your identifying number									
SHA	ASHANK KARNE	278-67-4984									
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 (lawf	ful permanent resid	ent) of the United States? .		∐ Yes	⊠ No					
D .		Were you ever:									
						⊠ No ⊠ No					
2	A green card holder (lawful permanent resident) of the		∟ Yes	△ NO							
E	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 yearF1										
F	Have you ever changed your visa type (nonimmigrant If you answered "Yes," indicate the date and nature or	status) or U.S. imn f the change:	nigration status?		∐ Yes	⊠ No					
G	List all dates you entered and left the United States du	uring 2023. See ins	tructions.								
	Note: If you're a resident of Canada or Mexico AND			_							
	check the box for Canada or Mexico and skip to ite			☐ Mexico							
	Date entered United States Date departed United Smm/dd/yy mm/dd/yy	States	Date entered United State mm/dd/yy		ted United m/dd/yy	d States					
	ППП/аа/уу		ПП/аа/уу	1111	iii/dd/yy						
Н	Give number of days (including vacation, nonworkdays,	and partial days) yo	were present in the United	States during:							
	2021, 2022	,	and 2023 365	·							
ı	Did you file a U.S. income tax return for any prior year				⊠ Yes	☐ No					
J	If "Yes," give the latest year and form number you filed Are you filing a return for a trust?				Yes	⊠ No					
J	If "Yes," did the trust have a U.S. or foreign owner u				res	△ NU					
	U.S. person, or receive a contribution from a U.S. person				Yes	□No					
K	Did you receive total compensation of \$250,000 or mo		☐ Yes	⊠ No							
	If "Yes," did you use an alternative method to determi	ine the source of th	is compensation?		☐ Yes	☐ No					
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign count complete (1) through (3) below. See Pub. 901 for more information on tax treaties.										
1	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 the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.										
	(a) Country	(b) Tax treaty	article (c) Number of mont	1 1							
	(e) Total. Enter this amount on Form 1040-NR, line 11		-		☐ Yes	□No					
		Were you subject to tax in a foreign country on any of the income shown in 1(d) above?									
3	Are you claiming treaty benefits pursuant to a Compe	-			⊔ Yes	⊠ No					
NA.	If "Yes," attach a copy of the Competent Authority de	termination letter to	your return.								
M 1	Check the applicable box if: This is the first year you are making an election to treat	at income from real	property located in the Linit	ed States as effo	ectively c	onnected					
	with a U.S. trade or business under section 871(d). Se	ee instructions				🗌					
2	 You have made an election in a previous year that I States as effectively connected with a U.S. trade or but 										