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

	5.000				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
YASH	I RAJENDRA GUJRE	336-75	-264	9	
Spouse's	s name	Spouse's soo	ial secu	urity number	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r vear vou a	ıre alı	thorizina \	<u> </u>
	whole dollars only on lines 1 through 5.	i yeai you a	ıı c au	uionzing.,	<u>'</u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	11	,880.
	Total tax		2		0.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	,576.
	Amount you want refunded to you		4		,576.
	Amount you owe		5		<i>,</i> 5 <i>i</i> 6 <i>i</i>
Part		keep a cop	y of y	our retui	rn)
my kno return (a to send for any Agent to paymen authoriz paymen busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abourginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transn my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectly in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lorinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incur 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 terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed as a payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment information necessary to answer inquiries and resolve issues related to the aligned information number (PIN) below is my signature for the income tax return (original or amended) I are for the income tax return (original or amended) I are founds Withdrawal Consent.	we are the am nitter, or electrection of the t i.S. Treasury a icated in the t on to debit the e the authoriz uests must be processing o payment. I fur	ounts for the counts of the co	from the inc turn originat ssion, (b) th designated paration soff to this acco To revoke (oved no late ectronic paracknowledge	come tax for (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the
	yer's PIN: check one box only	Γ_			
X	•	mv PIN 5		6 4 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	,
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Your si	gnature ▶ Date ▶				
Snous	e's PIN: check one box only	_			
	I authorize to enter or generate	my 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 r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	1			
Part I	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 ent	6 0	8 2 7	1
		Don tem	or all Zt		
authoriz	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 e-file Providers of I	nitting this reti	urn 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			

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. 1-Dec. 31, 2023, or other tax year beginning			ing, 2023, ending, 20			0	See separate instructions.		
Your first name and middle initial		Last name Y			Your identifying number				
						((see instructions)		
YASH RAJI	ENDF	A	GUJR	E			336-7	5-2649	
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
7421 FRAN	IKFO	RD ROAD						2932	
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.	;	State	ZII	P code	
DALLAS						TX	7.	5252	
Foreign country	nam nam	e	Foreign	n province/state/county		oreign po	stal code		
-									
Filing								e 🗌 Trust	
Status	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent						dent:		
Check only one box.									
	Λ± α	ny time during 2023, did you: (a) rece	ivo (00 0	roward award or naum	ant for property or oar	vices): or (b) coll ove	phonon or	
Digital Assets		erwise dispose of a digital asset (or a							
Dependents	+				, , ,	(4) Chec	k the box if	qualifies for (see inst.):	
(see instructions):		<u>-</u>	(2) Dependent's identifying number			Child	tax credit	Credit for other	
,		(1) First name Last name			(3) Relationship to you	0		dependents	
If more than four							<u> </u>		
dependents, see									
instructions and check here									
	10	Total amount from Form(a) W. O. has	. 1 (000)	not musticens)			<u> </u>	11,880.	
Income	1a	Total amount from Form(s) W-2, box	,	,			1a	11,000.	
Effectively	b	Household employee wages not rep Tip income not reported on line 1a (• •			1b 1c		
Connected With U.S.	c d	Medicaid waiver payments not repo		•			1d		
Trade or	e	1e							
Business	f	Taxable dependent care benefits from Employer-provided adoption benefit		·			1f		
Dusiness	g 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					1j		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	m Sched	ule OI (Form 1040-NR), i	tem L,				
here. Also		line 1(e)			1k				
attach	z	Add lines 1a through 1h	, .	,			1z	11,880.	
Form(s) 1099-R if	2 a	Tax-exempt interest 2	а	b Tax	cable interest		2b		
tax was	3a	Qualified dividends 3	а	b Ord	dinary dividends		3b		
withheld.	4a	IRA distributions 4a			kable amount		4b		
If you did not	5a	Pensions and annuities 5			kable amount		5b		
get a Form W-2, see	6	Reserved for future use					6		
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,	·				
	8	Additional income from Schedule 1					8	11 000	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		-			9	11,880.	
	10	Adjustments to income from Sched	•		•				
	44	income					10	11,880.	
	11	Subtract line 10 from line 9. This is y					11	11,000.	
	12	Itemized deductions (from Schedudeduction (see instructions)		13,850.					
	13a	Qualified business income deduction	12	10,000.					
	b	Exemptions for estates and trusts o							
	c	Add lines 13a and 13b	• .	,			13c		
	14						14	13,850.	
	15	Subtract line 14 from line 11. If zero						0.	

Form 1040-NR (2	2023)							Page 2
Tax and	16	Tax (see instructions). Check if any from Fo	orm(s): 1	314 2 497	2 3 \square		16	0.
Credits	17	Amount from Schedule 2 (Form 1040), line					17	0.
	18	Add lines 16 and 17	[18	0.			
	19	Child tax credit or credit for other depend		19				
	20	Amount from Schedule 3 (Form 1040), line		20				
	21	Add lines 19 and 20				[21	
	22	Subtract line 21 from line 18. If zero or les	s, enter -0			[22	0.
	23a	Tax on income not effectively connected	with a U.S. trade	or business from				
		Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment to	ax, from Schedule	e 2 (Form 1040),				
		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 to	ax				24	0.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a	L , 576.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				[25d	1,576.
	е	Form(s) 8805				[25e	
	f	Form(s) 8288-A				[25f	
	g	Form(s) 1042-S				[25g	
	26	2023 estimated tax payments and amoun	t applied from 20	22 return	<u></u>		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			31			
	32	Add lines 28, 29, and 31. These are your	total other paym	ents and refunda	ble credits	[32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32.	These are your to	otal payments .			33	1,576.
Refund	34	If line 33 is more than line 24, subtract line			•		34	1,576.
	35a	Amount of line 34 you want refunded to				. □ [35a	1,576.
Direct deposit?	b	Routing number 1 1 1 0 0 0		c Type: 🔀	Checking	Savings		
See instructions.	d	Account number 6 1 6 7 3 8						
	е	If you want your refund check mailed to a	an address outsid	le the United State	es not shown on	page 1,		
		enter it here.			T			
	36	Amount of line 34 you want applied to yo			36			
Amount	37	Subtract line 33 from line 24. This is the a	-					
You Owe		For details on how to pay, go to www.irs.	-				37	
	38	Estimated tax penalty (see instructions) u want to allow another person to discuss			38			
Third	•	es. Comple	te below.	⊠ No				
Party	Designee's Phone Personal identifiname no. number (PIN)						ation	
Designee	name Under	penalties of perjury, I declare that I have examine		companying schedu			best of my l	nowledge and
	belief,	they are true, correct, and complete. Declaration	of preparer (other t	han taxpayer) is base	ed on all informatio	n of which p	reparer has	any knowledge.
Sign	Your	signature	Date	Your occupation		I	•	ou an Identity
Here					I		enter it here	
	D.			PROJECT AN	ALYS'I'	(see ir	181.)	
	Phone		Email address		Date	PTIN	1 01	_1. :f.
Paid			r's signature					ck if:
Preparer			KIYA KAM SAGAF	R GUPTA TALLAM	02/20/2024	P02082		Self-employed
Use Only		sname GLOBAL TAXES LLC				Phone no	(/	965-9522
	⊢ırm'¢	address 245 DOOMEV CT T D	DIINICMITOR NI	T 08816		Firm's FIN	ı ×⊿–२	171965

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. Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number YASH RAJENDRA GUJRE 336-75-2649 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)				
Nature of income				(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			s, trademarks, etc.)		3					
4			ight royalties		4					
5	•		recording, publishing, etc.)		5					
6			natural resources royalties		6					
7					7					
8	Social security benefits									
9	Capital gain from line	18 b	elow		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		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		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).
	effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real									
or loss										
property interest; report these gains and losses on Schedule D										
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),								()	
Form 4797, 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.

Department of the Treasury Internal Revenue Service

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment Sequence No. 7C

lame	shown on Form 1040-NR				Your identifying	number					
YAS	SH RAJENDRA GUJRE				336-75-2						
Α	Of what country or countries v	vere you a citizen or nation:	al during the tax y	/ear? INDIA							
В	In what country did you claim	residence for tax purposes	s during the tax y	ear? United States							
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1	. A U.S. citizen?					☐ Yes	⊠ No				
2	. A green card holder (lawful pe	rmanent resident) of the Un	ited States? .			☐ Yes	⊠ No				
	If you answer "Yes" to (1) or (2	2), see Pub. 519, chapter 4,	for expatriation r	ules 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.										
F		lave you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and Note: If you're a resident of C check the box for Canada or	Canada or Mexico AND cor	g 2023. See instr nmute to work in	uctions. the United States at frequ							
	Date entered United States	Date departed United State	es	Date entered United State	s Date depa	arted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy					
Н	Give number of days (including 2021	vacation, nonworkdays, and									
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year? .				⊠ Yes	□No				
J	Are you filing a return for a true	st?		10401/1		Yes	⊠ No				
•	If "Yes," did the trust have a U.S. person, or receive a cont	U.S. or foreign owner unde	r the grantor trus	t rules, make a distribution	n or loan to a	□Yes	□No				
K	Did you receive total compens					☐ Yes	⊠ No				
	If "Yes," did you use an alterna					☐ Yes	□ No				
L	Income Exempt From Tax—If complete (1) through (3) below	f you are claiming exempti	ion from income	tax under a U.S. income							
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) Cou		(b) Tax treaty ar								
				claimed in prior tax ye	ears income i	n current t	ax year				
	(e) Total. Enter this amount o	n Form 1040-NR, line 1k. D	o not enter it any	where else on line 1							
2			-			☐ Yes	☐ No				
3						☐ Yes	⊠ No				
	If "Yes," attach a copy of the (· ·	•								
М	Check the applicable box if:	•	•								
1	This is the first year you are m with a U.S. trade or business u						onnected				
2	You have made an election in States as effectively connecte	n a previous year that has	not been revoke	ed, to treat income from re	eal property lo	cated in th					