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.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social secu	Social security number								
RISHIKANTH DEVA	177-19	9-6454								
Spouse's name	Spouse's so	ocial security number								
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)										
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 17,600.								
2 Total tax		2 378.								
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 1,249.								
4 Amount you want refunded to you		4 871.								
5 Amount you owe		5								

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	L
				ERO firm name		

9	6	4	5	4	
Ent dor	er fiv n't er	/e di iter a	gits, all ze	but ros	as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

Enter five digits, but don't enter all zeros

as mv

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature >	Da	ate 🕨	•									
Practitioner PIN Method Returns Only—continue below												
Part III Certification and Authentication – Practitioner PIN Metho	od Only											
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	ed PIN.	2	2				6 0 er all 2	_		7	1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So								
For Demonstrate Deduction Act Nation			Form 8870 (Day, 01 0001)					

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040	-1	IR Department of the Treasury-Interr U.S. Nonresident Ali			x Return	2023	OMB No. 15	45-0074	or stapl	Only—Do not write le in this space.	
For the year Jan	. 1–C	Dec. 31, 2023, or other tax year beginn	ing		, 2023,	ending	,	20		e separate structions.	
Your first name			Last name Yo					Your i	Your identifying number see instructions)		
RISHIKANT	Η		DEVA					177	177-19-6454		
Home address (numl	ber and street). If you have a P.O. box	, see inst	tructions.						Apt. no.	
13342 CHI	TTA	MWOOD LN									
City, town, or po	ost o	ffice. If you have a foreign address, als	o compl	lete spaces	below.		State		ZIP cod	de	
FRISCO							TX		7503	5	
Foreign country	nam	e	Foreign	n province/st	tate/county		Foreign	postal co	bde		
Filing Status Check only one box.	lf 	Single Married filing separately (MFS) Qualifying surviving spouse (QSS) If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende							state	Trust	
Digital Assets		ny time during 2023, did you: (a) receiverwise dispose of a digital asset (or a fi									
Dependents							(4) Ch	eck the bo	ox if qualifi	es for (see inst.):	
(see instructions):		(1) First name Last name		(2) Depe identifyin		(3) Relationship to	Chi	ld tax cree	ו דור	redit for other	
				lacitaryin	griambei		you			dependents	
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	1	17,600.	
Effectively	b	Household employee wages not rep		-					,	<i>i</i>	
Connected	с	Tip income not reported on line 1a (s							;		
With U.S.	d	Medicaid waiver payments not repor							1		
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 20	6			. 16	•		
Business	f Employer-provided adoption benefits from Form 8839, line 29										
A 44 1-	g	Wages from Form 8919, line 6									
Attach Form(s) W-2,	h	Other earned income (see instruction						. 11	1		
1042-S,	i	Reserved for future use				. <u>1i</u>			_		
SSA-1042-S, RRB-1042-S,	j	Reserved for future use				1 1		. 1 j	_		
and 8288-A	k	Total income exempt by a treaty from	n Schedi	ule OI (Form	1040-NR), it						
here. Also		line 1(e)	• •			· · · ·		_			
attach Form(s)	z	Add lines 1a through 1h	i ·							17,600.	
1099-R if	2a	Tax-exempt interest 2a				able interest					
tax was withheld.	3a 4a	Qualified dividends . . 3a IRA distributions . . 4a				inary dividends . able amount					
If you did not	4а 5а	Pensions and annuities				able amount					
get a Form	5a 6	Reserved for future use									
W-2, see	7	Capital gain or (loss). Attach Schedu							_		
instructions.	8	Additional income from Schedule 1 (•	•					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8								17,600.	
	10	Adjustments to income from Schedu									
		income	•)		
	11	Subtract line 10 from line 9. This is y	our adju	sted gross	income .			. 11		17,600.	
	12	Itemized deductions (from Schedu deduction (see instructions) .							2	13,850.	
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	с	Add lines 13a and 13b		,				. 13	c		
	14	Add lines 12 and 13c								13,850.	
	15	Subtract line 14 from line 11. If zero	or less, e	enter -0 Th	is is your tax	able income	<u> </u>	. 15	5	3,750.	
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separat	e instruction	6			Form 10	040-NR (2023)	

orm 1040-NR (2	2023)								Page 2
fax and	16	Tax (see instructions). Check if an	y from Foi	rm(s): 1 🗌 88	314 2 497	2 3		16	378.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3				. 17	0.
	18	Add lines 16 and 17							378.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (Form 10	40)		. 19	
	20	Amount from Schedule 3 (Form 1							
	21	Add lines 19 and 20	. 21						
	22	Subtract line 21 from line 18. If z	. 22	378.					
	23a	Tax on income not effectively cor	nected w	vith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo							
		line 21	-		. ,	23b			
	с	Transportation tax (see instructio				23c			
	d	Add lines 23a through 23c	,					. 23d	1
	24	Add lines 22 and 23d. This is you							378.
ayments	25	Federal income tax withheld from							
ayments	a	Form(s) W-2				25a	1,24	49.	
	b	Form(s) 1099				25b	-,-		
	c	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						. 25d	1,249.
	e	Form(s) 8805							1,219.
	f	Form(s) 8288-A						. 25f	
	g	Form(s) 1042-S							
	26	2023 estimated tax payments an		• •				. 26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S				28			
	29	Credit for amount paid with Form				29		_	
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1				31			4
	32	Add lines 28, 29, and 31. These a							1 0 4 0
	33	Add lines 25d, 25e, 25f, 25g, 26,							1,249.
efund	34	If line 33 is more than line 24, sul							871.
	35a	Amount of line 34 you want refu							871.
ect deposit? e instructions.	b	Routing number 1 0 3 0				Checking	Savir	ngs	
	d	Account number 3 0 5 0							
	е	If you want your refund check m	ailed to a	n address outsid	le the United State	es not shown on	page	e 1,	
		enter it here.				1			
	36	Amount of line 34 you want appl	ied to yo	ur 2024 estimat	ed tax	36			
mount	37	Subtract line 33 from line 24. This							
ou Owe		For details on how to pay, go to	0	2			• •	. 37	
r	38	Estimated tax penalty (see instru				38			
nird	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions. 🗌 Ye	es. C	omplete be	elow. 🛛 No
arty	Desig	nee's		Phone				entification	l
esignee	name								
		penalties of perjury, I declare that I hav							
ign		they are true, correct, and complete. D	eciaration		,	eu on all informatio			, ,
-	Your	signature		Date Your occupation					sent you an Identity
ere					ENGINEER			(see inst.)	PIN, enter it here
F								(See mst.)	
		e no. Irer's name	Prenarer	Email address		Date	PTI	N	Check if:
aid	•		•	e					Self-employed
eparer		PRIYA RAM SAGAR GUPTA TALLAM		LIA KAM SAGAH	R GUPTA TALLAM	02/09/2024		2082703	
	⊢ırm's	name GLOBAL TAXES I	LC				Pho		78)965-9522
se Only		address 245 ROONEY C		-				n'sEIN 8	34-3171965

SCHEDULE NEC
(Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Sequence No. 7B Your identifying number

2

Attachment

177-19-6454

RISHIKANTH DEVA

Enter a	amount of income und	er the a	appropriate rate of tax. See instructions.							
			Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
						(a) 10%	(b) 1376	(c) 50 %	%	%
1	Dividends and divide									
а	Dividends paid by U	.S. cor	porations		1a					
b	Dividends paid by fo	reign d	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) tra	ansactions	1c					
2	Interest:									
а					2a					
b	Paid by foreign corp	oratior	18		2b					
С	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)	5						
6			natural resources royalties	6						
7	7 Pensions and annuities									
8	Social security benef	fits .			8					
9										
10	Gambling-Resident	ts of C r -0	anada only. Enter net income in column (c).							
а	Winnings									
b	Losses		<u> </u>		10c					
11	Note: Enter winnings	s only.	ountries other than Canada.		11					
12	Other (specify):									
					12					
13	Add lines 1a through	12 in	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 business						-NR, line 23a 15	
			Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty	1	
losses f exchang within t	Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		(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).
effectively connected with a U.S. business. Do not include a gain										

connected with a U.S. business **17** Add columns (f) and (g) of line 16 on Schedule D (Form 1040), 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-Form 4797, or both.

or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D

Report property sales or exchanges that are effectively

(Form 1040).

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

18

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17 (

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074 2 Attachment

Answer	all	questions.
71101101	un	questions

Internal F	Revenue Service		Ans	wer all questions.			Sequence N	o. 7C			
Name sh	nown on Form 1040	0-NR				Your identifyir	ig number				
RISH	IKANTH DEV	VA				177-19-0	5454				
Α	Of what countr	ry or countries w	vere you a citizen or nation	al during the tax year?	INDIA						
в	In what countr	ry did you claim	residence for tax purpose	s during the tax year?	United States						
С	Have you ever	applied to be a	green card holder (lawful p	permanent resident) of	the United States? .		Yes	🛛 No			
D	Were you ever						_	(<u> </u>			
	A U.S. citizen?							🛛 No			
2.	-		rmanent resident) of the Ur				∐ Yes	🗙 No			
_	•	., .	?), see Pub. 519, chapter 4,	•							
Е			day of the tax year, enter y day of the tax year. _{F1}								
F	-		· · · · · · · · · · · · · · · · · · ·	tue) or LLS immigratio			☐ Yes	X No			
F	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:										
G	l ist all dates v	ou entered and	left the United States durin	a 2023. See instruction							
ä	•		Canada or Mexico AND cor	-		ent intervals.					
			Mexico and skip to item H								
	Date entered	United States	Date departed United Stat	es Da	te entered United States	Date der	parted Unite	d States			
	mm/	/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy				
Н			vacation, nonworkdays, and	• • • •		-					
	Did you file a l	IS income tax	, 2022, return for any prior year? .	, and 202		· · ·	X Yes	No			
•			nd form number you filed:								
J	Are you filing a	a return for a true	st?				🗌 Yes	🗙 No			
	If "Yes," did th	ne trust have a l	U.S. or foreign owner unde	er the grantor trust rule	s, make a distribution	or loan to a					
			ribution from a U.S. person					🗌 No			
Κ	-		ation of \$250,000 or more					🛛 No			
_			ative method to determine		•			□ No			
L			f you are claiming exempt v. See Pub. 901 for more int			ax treaty wi	th a foreign	country,			
1.			the applicable tax treaty art the columns below. Attach Fo			claimed the t	reaty benefi	t, and the			
		(a) Cou	ntry	(b) Tax treaty article	(c) Number of month		mount of exe				
					claimed in prior tax yea	ars income	in current ta	ax year			
	(e) Total. Ente	er this amount o	n Form 1040-NR, line 1k. D	o not enter it anywher	e else on line 1						
			preign country on any of the				Ves	🗌 No			
3.	•	• •	ts pursuant to a Competent	•			Ves	🗙 No			
			Competent Authority deterr	nination letter to your r	eturn.						
М	Check the app			, .			<i></i>				
1.			aking an election to treat in under section 871(d). See ir		ty located in the Unite		-	onnected			
2.			n a previous year that has					ne United			
	States as effect	tively connecte	d with a U.S. trade or busin	ness under section 871	(d). See instructions .			. 🗌			

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/05/24 PRO Schedule OI (Form 1040-NR) 2023