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.....

Taxpay	er's name	Social security number					
MON	ISH ADAPA	145	5-77-	8430)		
Spouse	's name		Spous	e's socia	al secu	rity number	
Part	Tax Return Information – Tax Year Ending December 31, 2023	3 (Enter	year y	you ar	e aut	horizing.)	
Enter	whole dollars only on lines 1 through 5.					0 /	
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income				1	17,400.	
2	Total tax			[2	358.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			[3	1,304.	
4	Amount you want refunded to you			[4	946.	
5	Amount you owe			[5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you ge	et and k	keep a	сору	of y	our return)	

Under penalties of perjury, 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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN

			gits, all ze		as my
7	8	4	3	0	

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.

Your signature	A MONISH	Date 🕨		
Spouse's PIN: check one box	k only			
I authorize		to enter or generate my PIN		as my
aignature on the inequ	ERO firm name		Enter five digits, but don't enter all zeros	

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 s	ignature 🕨 Da	ate								
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 0 all ze	 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 Paperwork Reduction Act Notice, see your tax retur	n instructions.	REV 02/05/24 PRO	Form 8879 (Rev. 01-2021)							

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

1040)	NR Department of the Treasury-Inter U.S. Nonresident AI	rnal Revenu ien Inc	e Service	n 20	23	OMB No.	. 1545-00	74 IR	S Use Only-E or staple in th	iis space.		
For the year Jan	Dec. 31, 2023, or other tax year beginr	, 2023,	, ending			, 20		See sep instruct					
Your first name	and	middle initial	Last name Y						Your identifying number				
								(see	(see instructions)				
MONISH			ADAPA					14	5-	77-8430			
	•	ber and street). If you have a P.O. box	, see inst	ructions.							. no.		
7934 NORT							0			10	/1		
	OSL	office. If you have a foreign address, al	so comple	ete spaces below.			State						
IRVING Foreign country	nar	ne	Foreign	province/state/county			TX Foreic	n postal		75063			
r oreigin country	nai		l	province/state/county				jii postai	cou				
Filing													
Status		Single Married filing separate			-				Esta	ate 🗌	Trust		
Check only		you checked the QSS box, enter the	child's na	me if the qualifying per	son is a ch	nild but no	t your d	ependen	it:				
one box.	-												
Digital Assets	At	any time during 2023, did you: (a) rece	ive (as a r	eward, award, or paym	ent for pro	operty or s	ervices)	; or (b) s	ell, e	xchange, o			
		erwise dispose of a digital asset (or a	financial i	nterest in a digital asse	t)? (See in	structions					🔀 No		
Dependents				(2) Dependent's						if qualifies for	(see inst.): or other		
(see instructions):		(1) First name Last name		identifying number	(3) Relationship to you		ou	Child tax o	credit	depen			
16]		
If more than four dependents, see											<u> </u>		
instructions and											<u> </u>		
check here													
Income	1a	Total amount from Form(s) W-2, box	•	,					<u>1a</u>	17	,400.		
Effectively	b	Household employee wages not rep							1b				
Connected With U.S.	c d	Tip income not reported on line 1a (Medicaid waiver payments not repo						•• -	<u>1c</u> 1d				
Trade or	e	Taxable dependent care benefits fro					• •	•••	1e				
Business	f	Employer-provided adoption benefi							1f				
Business	g	Wages from Form 8919, line 6							1g				
Attach Form(s) W-2,	h	Other earned income (see instructio							1h				
1042-S,	i	Reserved for future use				1i							
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1			· ·	1j				
and 8288-A	k	· · · · · · · · · · · · · · · · · · ·	m Schedu	lle OI (Form 1040-NR),									
here. Also		line 1(e)				1k				1 7	400		
attach Form(s)	z	Add lines 1a through 1h	1	 ь.т.					1z	1/	,400.		
1099-R if	2a 3a	Tax-exempt interest 2 Qualified dividends 3			xable inter dinary divi				2b 3b				
tax was withheld.	4a	IRA distributions 4			xable amo				4b				
lf you did not	5a	Pensions and annuities 5			xable amo			_	5b				
get a Form	6	Reserved for future use						_	6				
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ule D (For	m 1040) if required. If n	ot require	d, check h	ere .	. 🗆 [7				
	8	Additional income from Schedule 1	(Form 104	40), line 10				[8				
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively of	connected	l income		🗋	9	17	,400.		
	10	Adjustments to income from Scheol	•	rm 1040), line 26. Thes	•	-			10				
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income				L	11	17	,400.		
	12	Itemized deductions (from Schedu deduction (see instructions)			. Std				12	13	,850.		
	13a	Qualified business income deductio	n from Fo	rm 8995 or Form 8995	-A.	13a							
	b	Exemptions for estates and trusts o				13b							
	С	Add lines 13a and 13b						-	13c				
	14 45							-	14		<u>,850.</u>		
	15	Subtract line 14 from line 11. If zero	or less, e	nter -U Inis is your ta	ixable inc	ome .	· ·		15		,550.		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

orm 1040-NR (2023)						Page
Tax and	16	Tax (see instructions). Check if any	y from Form(s): 1	8814 2 4 9	972 3		16 358.
Credits	17	Amount from Schedule 2 (Form 1					17 0.
	18	Add lines 16 and 17					18 358.
	19	Child tax credit or credit for other					19
	20	Amount from Schedule 3 (Form 1					20
	21	Add lines 19 and 20					21
	22	Subtract line 21 from line 18. If ze					22 358.
	23a	Tax on income not effectively cor	-				
	200	Schedule NEC (Form 1040-NR), li			23a		
	b	Other taxes, including self-emplo					
			-		23b		
	с	Transportation tax (see instructio			23c		
	d	Add lines 23a through 23c	,			2	23d
	24	Add lines 22 and 23d. This is you					24 358.
ayments	25	Federal income tax withheld from		<u> </u>		<u> </u>	550.
ayments	25 a	Form(s) W-2			25a	1,304.	
					25a	1,304.	
	b c	Form(s) 1099			250 25c		
	с d	Add lines 25a through 25c					25d 1,304.
		Form(s) 8805					25e
	e						
	f	Form(s) 8288-A					25f
	g	Form(s) 1042-S					25g
	26	2023 estimated tax payments and					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		
	32	Add lines 28, 29, and 31. These a					32
	33	Add lines 25d, 25e, 25f, 25g, 26,					33 1,304.
efund	34	If line 33 is more than line 24, sub			-		34 946.
	35a	Amount of line 34 you want refur					35a 946.
rect deposit? e instructions.	b	Routing number 1 2 5 0			Checking	Savings	
e instructions.	d	Account number 1 3 8 1					
	е	If you want your refund check ma	ailed to an address	outside the United Sta	ates not shown on	page 1,	
		enter it here.					
	36	Amount of line 34 you want appli	ied to your 2024 es	timated tax	36		
mount	37	Subtract line 33 from line 24. This	-				
ou Owe		For details on how to pay, go to	www.irs.gov/Payme	nts or see instructions		· · · 📘	37
	38	Estimated tax penalty (see instrue	ctions)		38		
hird	Do yo	u want to allow another person to	discuss this return v	with the IRS? See instr	ructions. 🗌 🛛	es. Complete	e below. 🛛 🗙 No
arty	Desig	nee's	F	Phone	Persor	nal identificat	tion
esignee	name		r	וס	numbe	er (PIN)	
		penalties of perjury, I declare that I hav					
ian	belief,	they are true, correct, and complete. D					
ign	Your	signature	Date	Your occupatio	n		RS sent you an Identity
ere							tion PIN, enter it here
	DI			SOFTWARE	ENGINEEK	(see ins	sl.j
	Phone		Email add		Data	PTIN	
aid	•		Preparer's signatur		Date		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		SAGAR GUPTA TALLAN	M 02/11/2024	P020827	
reparer			TC			Phone no.	(678) 965-9522
reparer Ise Only	Firm's	aname GLOBAL TAXES I address 245 ROONEY C				Firm's EIN	84-3171965

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

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2023 Attachment Sequence No. 7B Your identifying number

NAME SNOWN ON FORM 1040-NR MONISH ADAPA

145-77-8430

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			(a) 10%	(b) 13%	(C) 30%	%	%		
1	Dividends and divide	nd equivalents:									
а	Dividends paid by U.	S. corporations		1a							
b	Dividends paid by for	reign corporations		1b							
С	Dividend equivalent p	ayments received with respect to section 871(m) tr	ransactions	1c							
2	Interest:										
а	Mortgage			2a							
b	Paid by foreign corpo	prations	2b								
с	Other		2c								
3	Industrial royalties (pa	atents, trademarks, etc.)	3								
4	Motion picture or TV	copyright royalties	[4							
5	Other royalties (copy	rights, recording, publishing, etc.)	[5							
6	Real property income	e and natural resources royalties	6								
7	Pensions and annuiti	es	[7							
8											
9		e 18 below		9							
10	Gambling—Resident	s of Canada only. Enter net income in column (c) r -0).								
а	Winnings										
b	Losses			10c							
11	Note: Enter winnings	s of countries other than Canada.		11							
12	Other (specify):										
				12							
13	Add lines 1a through	12 in columns (a) through (d)		13							
14		ate of tax at top of each column		14							
15	Tax on income not ef	ffectively connected with a U.S. trade or busines						-NR, line 23a 15			
		Capital Gains and	d Losses Fi	rom	Sales or Excha	nges of Propert	у				
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 acqui mm/dd/yyy		(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).		
	vely connected with a U.S. ss. Do not include a gain										
or loss	on disposing of a U.S. real ty interest; report these										
gains a	nd losses on Schedule D										
(Form 1											
exchan	property sales or ges that are effectively										
	eted with a U.S. business edule D (Form 1040),										
	1797, or both.	18 Capital gain. Combine columns (f) and ((g) of line 17.	Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	er-0 18			

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

._ OMB No. 1545-0074 2023

	nent of the Treasury Go t Revenue Service	to www.irs.gov/Form1040N Ans	IR for instructions and swer all questions.	the latest information.		Attachment Sequence N	lo. 7C
Name s	hown on Form 1040-NR				Your identify		
MONI	ISH ADAPA				145-77-	8430	
Α	Of what country or countries w						
в	In what country did you claim	residence for tax purpose	es 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:						
							🗙 No
2.	A green card holder (lawful pe	-				. 🗌 Yes	🛛 No
	If you answer "Yes" to (1) or (2						
Е	If you had a visa on the last immigration status on the last of			didn't have a visa, en	-		
F	Have you ever changed your v If you answered "Yes," indicat			on status?			🗙 No
G	List all dates you entered and	left the United States durin				-	
	Note: If you're a resident of C	anada or Mexico AND co	mmute to work in the	United States at frequ	ent intervals	з,	
	check the box for Canada or	r Mexico and skip to item I	<u>H.</u> <u>.</u>	🗌 Canada	Mexico	2	
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	tes Da	te entered United State mm/dd/yy	s Date de	eparted Unite mm/dd/yy	d States
				,,,		,,	
н	Give number of days (including 2021	vacation, nonworkdays, and , 2022			-):	
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year? .					🗌 No
J	Are you filing a return for a true	st?				Yes	🗙 No
	If "Yes," did the trust have a U.S. person, or receive a cont	U.S. or foreign owner unde	er the grantor trust rule	es, make a distributior	n or loan to a	a _	
K	Did you receive total compens						∐ No ⊠ No
K	If "Yes," did you use an alterna						
L	Income Exempt From Tax-If						
-	complete (1) through (3) below				lax lically w	itir a toroigi	recountry
1.	Enter the name of the country,				claimed the	treaty benef	it and the
	amount of exempt income in th					liouty bonon	it, and the
	(a) Cou	Intry	(b) Tax treaty article	(c) Number of month	ns (d) /	Amount of ex	empt
		,		claimed in prior tax ye		e in current t	
			-				
	(e) Total. Enter this amount o		•				
2.	Were you subject to tax in a fo						∐ No
3.	Are you claiming treaty benefit		-			Yes	🗙 No
NA	If "Yes," attach a copy of the C	Jompetent Authority deter	mination letter to your	return.			
M 1.	Check the applicable box if: This is the first year you are m	aking an election to treat in	ncome from real prope	rty located in the Unite	ed States as	effectively c	onnected
	The let he first year year and the	aning an electron to a cat h	neenne nenn rear prope	ing lood of the office		000	0

with a U.S. trade or business under section 871(d). See instructions 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business 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