8879 Form

(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

	<u> </u>
Submission Identification Number (SID)	
Taxpayer's name	Social security number
PRANITA KANCHAN	087-53-7547
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending Decem	hber 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 blan	nk.
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization Under penalties of perjury, I declare that I have examined a copy of the income t	
return (original or amended) I am now authorizing. I consent to allow my interme to send my return to the IRS and to receive from the IRS (a) an acknowledgeme for any delay in processing the return or refund, and (c) the date of any refund. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the fin payment of my federal taxes owed on this return and/or a payment of estimated authorization is to remain in full force and effect until I notify the U.S. Treasur payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-453 business days prior to the payment (settlement) date. I also authorize the finance taxes to receive confidential information necessary to answer inquiries and repersonal identification number (PIN) below is my signature for the income tax re Electronic Funds Withdrawal Consent.	ent of receipt or reason for rejection of the transmission, (b) the reason of applicable, I authorize the U.S. Treasury and its designated Financial nancial institution account indicated in the tax preparation software for tax, and the financial institution to debit the entry to this account. This y Financial Agent to terminate the authorization. To revoke (cancel) a B7. Payment cancellation requests must be received no later than 2 cial institutions involved in the processing of the electronic payment of esolve issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN 3 7 5 4 7 as my
ERO firm name signature on the income tax return (original or amended) I am r	Enter five digits, but
☐ I will enter my PIN as my signature on the income tax return (c	original or amended) I am now authorizing. Check this box only the Practitioner PIN method. The ERO must complete Part III
Your signature ▶	Date ▶
Occurred BIN short are however	
Spouse's PIN: check one box only	to contact our group exists must DIM
I authorize ERO firm name	to enter or generate my PIN as my Enter five digits, but
signature on the income tax return (original or amended) I am r	dank antan all mana
	original or amended) I am now authorizing. Check this box only the Practitioner PIN method. The ERO must complete Part III
Spouse's signature ▶	Date ▶
Practitioner PIN Method Return	s Only—continue below
Part III Certification and Authentication — Practitioner Pl	N Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit se	elf-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the authorized to file for tax year indicated above for the taxpayer(s) indicated above requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized to file above.	ove. I confirm that I am submitting this return in accordance with the
ERO's signature ▶	Date ▶
ERO Must Retain This Form	
=	

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

2002	2
	5

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn			ning	, 2023,	20	See separate instructions.				
Your first name and middle initial			Last na	ame			Your ide	ntifying number		
					(see instructions)					
PRANITA			KANC	HAN			087-5	087-53-7547		
Home address	(numl	ber and street). If you have a P.O. bo	x, see ins	tructions.				Apt. no.		
		ND STREET								
City, town, or p	ost o	ffice. If you have a foreign address, a	also comp	lete spaces below.		State	Z	IP code		
PHILADELF						PA		.9121		
Foreign country name Foreign province/state/county Foreign posta								9		
Filing Status		☐ Esta	te 🗌 Trust							
Check only	lf '	you checked the QSS box, enter the	child's n	ame if the qualifying pers	son is a child but not	your depe	endent:			
one box.										
Digital Assets	At a	ny time during 2023, did you: (a) rec	eive (as a	reward, award, or payme	ent for property or se	ervices); o	(b) sell, ex	change, or		
g	othe	erwise dispose of a digital asset (or a	financial	interest in a digital asset)? (See instructions.)			Yes 🛛 No		
Dependents						(4) Ch	eck the box it	f qualifies for (see inst.):		
(see instructions):		(4) First name	•	(2) Dependent's identifying number	(2) Polationahin to ve	Chil	d tax credit	Credit for other		
		(1) First name Last name	9	identifying number	(3) Relationship to yo	ou		dependents		
If more than four										
dependents, see										
instructions and check here							\dashv			
Income	1a	Total amount from Form(s) W-2, bo	ny 1 (see i	netructions)			. 1a	9,020.		
Effectively	b	Household employee wages not re	•	,				3,020.		
Connected	c	Tip income not reported on line 1a								
With U.S.	d	Medicaid waiver payments not rep					. 1d			
Trade or	е	. 1e								
Business	f	Taxable dependent care benefits for Employer-provided adoption benefits					. 1f			
	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	k	Total income exempt by a treaty from								
here. Also		line 1(e)								
attach Form(s)	Z	Add lines 1a through 1h	. 1z	9,020.						
1099-R if	2a	Tax-exempt interest	. 2b							
tax was	3a	· · · · · · · · · · · · · · · · · · ·	Ba		linary dividends .					
withheld.	4a	-	la		able amount					
If you did not get a Form	5a	<u> </u>	5a		able amount					
W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach School	•	, ,	•					
	8	Additional income from Schedule 1		0 000						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						9,020.		
	10	Adjustments to income from Sche income								
	11	Subtract line 10 from line 9. This is						9,020.		
	12	Itemized deductions (from Sched deduction (see instructions)	lule A (Fo	rm 1040-NR)) or, for cer	tain residents of Ind	ia, standa	rd	13,850.		
	13a	Qualified business income deduction				maia itc	4~1 1Z	10,000.		
	b	Exemptions for estates and trusts								
	C	Add lines 13a and 13b					. 13c			
	14							13,850.		
	15	Subtract line 1/1 from line 11. If zero					15	10,000.		

Form 1040-NR (2023)											Page 2
Tax and	16	Tax (see instructions). Check if any fr	om For	m(s): 1	88	14 2	<u> </u>	'2 3			16	0.
Credits	17										17	0.
	18	Add lines 16 and 17									18	0.
	19	Child tax credit or credit for other de	epende	ents from Sc	hedu	le 8812 (Form 10)40) .			19	
	20	Amount from Schedule 3 (Form 104	0), line	8							20	
	21	Add lines 19 and 20									21	
	22	Subtract line 21 from line 18. If zero	or less	s, enter -0-							22	0.
	23a	Tax on income not effectively conne	ected w	rith a U.S. tra	ade o	r busines	s from					
		Schedule NEC (Form 1040-NR), line	15 .					23a				
	b	Other taxes, including self-employn	nent ta	x, from Sche	edule	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 to	otal ta	x							24	0.
Payments	25	Federal income tax withheld from:										
	а	Form(s) W-2						25a		1 , 398.		
	b	Form(s) 1099						25b				
	С	Other forms (see instructions)						25c				
	d	Add lines 25a through 25c									25d	1,398.
	е	Form(s) 8805									25e	
	f	Form(s) 8288-A									25f	
	g	Form(s) 1042-S									25g	
	26	2023 estimated tax payments and a	ımount	applied from	n 202	22 return					26	
	27	Reserved for future use						27				
	28	Additional child tax credit from Scho	edule 8	812 (Form 1	040)			28				
	29	Credit for amount paid with Form 10	040-C					29				
	30	Reserved for future use						30				
	31	Amount from Schedule 3 (Form 104	0), line	15				31				
	32	Add lines 28, 29, and 31. These are	your t o	otal other p	ayme	ents and	refunda	able cre	edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, an	d 32. T	hese are yo	ur to t	tal paym	ents .				33	1,398.
Refund	34	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid									34	1,398.
	35a	, , ,									35a	1,398.
Direct deposit?	b	Routing number X X X X X	ХХ	X X X		c Typ	e: 🗌	Check	ing \square	Savings		
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X										
	е	If you want your refund check mailed to an address outside the United States not shown on page 1,										
		enter it here.										
	36	Amount of line 34 you want applied	l to you	ur 2024 esti	mate	d tax		36				
Amount	37	Subtract line 33 from line 24. This is	the ar	nount you o	we.							
You Owe		For details on how to pay, go to ww	w.irs.g	ov/Payment	s or s	see instru	ctions .				37	
	38	Estimated tax penalty (see instruction	ons) .					38				
Third	Do yo	ou want to allow another person to dis	scuss t	his return wi	th the	RS? Se	e instru	ctions.	Y	es. Comp	olete be	low. 🗵 No
Party	Desig	nee's		Ph	one				Perso	nal identi	fication	
Designee	name	·										
		penalties of perjury, I declare that I have e they are true, correct, and complete. Declar										
Sign	Your signature			Date Your occupation					If th	ne IRS s	ent you an Identity	
Here	Tour signature			Date Tour occupation						PIN, enter it here		
						PRODU	CT MA	NAGE	R	(see	e inst.)	
	Phone	e no.		Email addr	ess							
Paid	Prepa	rer's name Pr	eparer	's signature				Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SY	YAM PR	IYA RAM S	AGAR	GUPTA '	TALLAM	02/2	9/2024	P0208	2703	Self-employed
Preparer	Firm's	s name GLOBAL TAXES LL	С					•		Phone	no. (6	78) 965-9522
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E									4-3171965		

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. Attachment Sequence No. **7B**

OMB No. 1545-0074

Name shown on Form 1040-NR PRANITA KANCHAN

Your identifying number 087-53-7547

	Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
		Nature of income		(a) 1070	(b) 1370	(6) 30 70	%	%		
1	Dividends and divide	end equivalents:								
а	Dividends paid by U	.S. corporations		1a						
b	Dividends paid by fo	reign corporations		1b						
С	Dividend equivalent p	payments received with respect to section 871(m) tra	ansactions	1c						
2	Interest:									
а	Mortgage			2a						
b	Paid by foreign corp	orations		2b						
С	Other			2c						
3	Industrial royalties (p	oatents, trademarks, etc.)		3						
4	Motion picture or TV	copyright royalties		4						
5		rights, recording, publishing, etc.)		5						
6	Real property incom	e and natural resources royalties		6						
7	Pensions and annuit	ies		7						
8	Social security bene-	fits		8						
9		e 18 below	9							
10	Gambling—Resident If zero or less, ente	ts of Canada only. Enter net income in column (c). •r - 0								
а	Winnings									
b	Losses	<u> </u>		10c						
11	Gambling—Resident Note: Enter winnings	ts of countries other than Canada. s only. Losses aren't allowed		11						
12	Other (specify):									
				12						
13	Add lines 1a through	n 12 in columns (a) through (d)		13						
14	Multiply line 13 by r	rate of tax at top of each column		14						
15	Tax on income not e	ffectively connected with a U.S. trade or business	. Add colun	nns (a) t	through (d) of line 1	4. Enter the total here	and on Form 1040	D-NR, line 23a 15		
		Capital Gains and	Losses	From	Sales or Excha	anges of Propert	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).	
effectiv	rely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	ty interest; report these nd losses on Schedule D									
(Form 1	•									
Report exchan	property sales or ges that are effectively									
connec	eted with a U.S. business edule D (Form 1040),									
	1797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17	7. Ente	er the net gain her	re and on line 9 abo	ove. If a loss, enter	er -0 18		

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

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.

	2023			
	Attachment Sequence No. 7C			
Your identifying number				

PRA	NITA KANCHAN				087-53-7	547						
Α	Of what country or countries	were you a citizen or national	al during the tax ye	ar? 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?					☐ Yes	⊠ No					
2	A green card holder (lawful pe	ermanent resident) of the Ur	ited States?			☐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2	2), see Pub. 519, chapter 4,	for expatriation rul	es that apply to you.								
Ε	If you had a visa on the last	day of the tax year, enter	your visa type. If y	ou didn't have a visa, en	er your U.S.							
	immigration status on the last day of the tax year. $_{\mathbb{F}1}$											
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?											
	If you answered "Yes," indica	te the date and nature of the	e change:									
G	If you answered "Yes," indicate the date and nature of the change: List all dates you entered and left the United States during 2023. See instructions.											
	Note: If you're a resident of 0	Canada or Mexico AND cor	nmute to work in t	he United States at frequ	ent intervals,							
	check the box for Canada o	r Mexico and skip to item H	1	\square Canada	☐ Mexico							
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Date entered United States mm/dd/yy		arted Unite mm/dd/yy	d States					
Н	Give number of days (including											
	2021	, 2022	, and	2023 245	·	_						
I	Did you file a U.S. income tax	return for any prior year? .				☐ Yes	⊠ No					
	If "Yes," give the latest year a	nd form number you filed:					_					
J	Are you filing a return for a tru	ıst?				☐ Yes	X No					
	If "Yes," did the trust have a											
	U.S. person, or receive a conf	•					☐ No					
K	Did you receive total compens						⊠ No					
	If "Yes," did you use an altern			•			☐ No					
L	Income Exempt From Tax—I complete (1) through (3) below	v. See Pub. 901 for more inf	formation on tax tre	eaties.			•					
1	Enter the name of the country,				claimed the tr	eaty benef	it, and the					
	amount of exempt income in the		· · · · · · · · · · · · · · · · · · ·									
	(a) Cou	ıntry	(b) Tax treaty artic	cle (c) Number of month	hs (d) Amount of exempt ears income in current tax year							
				olamiod in prior tax yo	11001110	carrone e						
	(e) Total. Enter this amount of	on Form 1040-NR, line 1k. D	o not enter it anyw	here else on line 1								
2	Were you subject to tax in a fo		•			☐ Yes	☐ No					
3				• •		Yes	⊠ No					
	If "Yes," attach a copy of the	•	•									
М	Check the applicable box if:	•	Í									
1	This is the first year you are m											
	with a U.S. trade or business	` '										
2	You have made an election i											
	States as effectively connected	ed with a U.S. trade or busing	ess under section	871(d). See instructions.			🗌					
For P	aperwork Reduction Act Notice	, see the Instructions for Fo	rm 1040-NR.	BAA REV 02/16/24 PRO	Schedule C	I (Form 104	0-NR) 2023					