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

Submission Identification Number (SID)					
Taxpayer's name		Social securit	y numb	er	
MANIDEEP KARNE		834-54-	-3927	7	
Spouse's name		Spouse's soc			
Port I Toy Poture Information Toy	Voor Ending Documber 21 2022 /En	ator voor vou o	ro out	horizina \	
Part I Tax Return Information — Tax	rear Ending December 31, 2023 (En	nter year you a	re aut	nonzing.)	
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 1	9,	440.
			2		0.
3 Federal income tax withheld from Form(s)	W-2 and Form(s) 1099		3		73.
4 Amount you want refunded to you			4		73.
5 Amount you owe			5		
Part II Taxpayer Declaration and Sign	ature Authorization (Be sure you get an	d keep a cop	y of y	our retur	n)
Under penalties of perjury, I declare that I have examinmy knowledge and belief, it is true, correct, and comreturn (original or amended) I am now authorizing. I coit to send my return to the IRS and to receive from the IR for any delay in processing the return or refund, and (c Agent to initiate an ACH electronic funds withdrawal (c payment of my federal taxes owed on this return and/c authorization is to remain in full force and effect until payment, I must contact the U.S. Treasury Financial business days prior to the payment (settlement) date. taxes to receive confidential information necessary to personal identification number (PIN) below is my signa Electronic Funds Withdrawal Consent.	plete. I further declare that the amounts in Part I ansent to allow my intermediate service provider, trans (a) an acknowledgement of receipt or reason for the date of any refund. If applicable, I authorize the direct debit) entry to the financial institution account or a payment of estimated tax, and the financial institution I notify the U.S. Treasury Financial Agent to termin Agent at 1-888-353-4537. Payment cancellation I also authorize the financial institutions involved in answer inquiries and resolve issues related to the	above are the amount of the tree U.S. Treasury an indicated in the tatution to debit the nate the authorizate guests must be the processing of the payment. I further the same the processing of the payment. I further releases the processing of the payment.	ounts from the counts of the counts of the country the	om the incurry originate sion, (b) the lesignated Faration soft to this account or evoke (c/ed no later ectronic payknowledge	ome tax or (ERO) e reason Financial ware for unt. This ancel) a r than 2 ment of that the
Taxpayer's PIN: check one box only		Ţ.			
X lauthorize GLOBAL TAXES LLC	to enter or genera	ate mv PIN	-		as my
ERO firr signature on the income tax return (original contents)	n name	ř Ent		digits, but r all zeros	,
☐ I will enter my PIN as my signature on t	he income tax return (original or amended) I ar our return is filed using the Practitioner PIN m				
Your signature ▶	Date ▶	-			
Spouse's PIN: check one box only					
I authorize	to enter or genera	ate my DINI			as my
ERO firr		_	ter five	digits, but	as my
signature on the income tax return (origi	inal or amended) I am now authorizing.	doı	n't ente	r all zeros	
	he income tax return (original or amended) I ar our return is filed using the Practitioner PIN m				
Spouse's signature ▶	Date ▶	•			
Practitione	r PIN Method Returns Only—continue bel	ow			
Part III Certification and Authenticatio	n — Practitioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN follow	ved by your five-digit self-selected PIN. 2	2 2 4 9 Don't ente	6 0 er all ze	8 2 7 ros	1
I certify that the above numeric entry is my PIN, which authorized to file for tax year indicated above for the requirements of the Practitioner PIN method and Pub .	taxpayer(s) indicated above. I confirm that I am su	ubmitting this retu	ırn in a	ccordance	
ERO's signature ▶	Date ▶	-			
	st Retain This Form — See Instructions				
Don't Submit Th	nis Form to the IRS Unless Requested T	o 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 beginn			ing, 2023, ending, 20					See separate instructions.	
Your first name	and r	niddle initial	Last name Y				Your identifying number		
							(see instructions)		
MANIDEEP				E	834-54-3927				
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
906 SUTTE	ER G	ATE LANE							
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State	ZI	P code	
MORRISVII	LE					NC	2	7560	
Foreign country	/ nam	e	Foreigr	n province/state/county		Foreign p	ostal code		
Filing		Single	arately (N	ΔES) □ Qualifvii	ng surviving spouse (C	088)	☐ Estat	e 🔲 Trust	
Status									
Check only	"	you checked the QSS box, enter the o	ornia o ric	arrie ii trie quamying pere	on is a orma barrior y	oui depei	ident.		
one box.									
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a f							
	+	rwise dispose of a digital asset (of a l	manciai	Interest in a digital asset)? (See instructions.)				
Dependents				(2) Dependent's		1		qualifies for (see inst.): Credit for other	
(see instructions):		(1) First name Last name		identifying number	(3) Relationship to you	ı Child	tax credit	dependents	
If more than four dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	< 1 (see i	nstructions)			1a	9,440.	
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2			1b		
Connected	С	Tip income not reported on line 1a (see instr	uctions)			1c		
With U.S.	d	Medicaid waiver payments not repo		` ,	,		1d		
Trade or	е	Taxable dependent care benefits fro		·			1e		
Business	f	Employer-provided adoption benefit		•			1f		
Attach	g	Wages from Form 8919, line 6					1g		
Form(s) W-2,	h	Other earned income (see instructio					1h		
1042-S,	i	Reserved for future use			<u>li</u>				
SSA-1042-S, RRB-1042-S,	J	Reserved for future use					1j		
and 8288-A	k	Total income exempt by a treaty from		,					
here. Also attach		line 1(e)			1k		4	0 440	
Form(s)	z	Add lines 1a through 1h	1	1			1z	9,440.	
1099-R if	2a	Tax-exempt interest 2a	_		cable interest		2b 3b		
tax was withheld.	3a 4a	Qualified dividends 3a IRA distributions 4a			dinary dividends		4b		
If you did not	ч а 5а	Pensions and annuities 5a			cable amount		5b		
get a Form	5 <i>a</i>	Reserved for future use	6						
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						9,440.	
	10	Adjustments to income from Sched						· · · · ·	
		income		•	•		10		
	11	Subtract line 10 from line 9. This is y	our adj u	sted gross income			11	9,440.	
	12	Itemized deductions (from Schedu							
		deduction (see instructions)	,	,, ,		,		13,850.	
	13a	Qualified business income deductio	n from F	orm 8995 or Form 8995-	-A . 13a			<u> </u>	
	b	Exemptions for estates and trusts of	nly (see i	instructions)	13b				
	С	Add lines 13a and 13b			.		13c		
	14	Add lines 12 and 13c					14	13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income	<u> </u>	15	0.	

Form 1040-NR (2023)											Page 2
Tax and	16	Tax (see instructions). Check if any	y from For	rm(s): 1 88	314 2 [4972	2 ;	3 🗌 _		16		0.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3						17		0.
	18	Add lines 16 and 17								18		0.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (Fo	orm 104	40) .			19		
	20	Amount from Schedule 3 (Form 1	040), line	8						20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0						22		0.
	23a	Tax on income not effectively cor Schedule NEC (Form 1040-NR), li		rith a U.S. trade o			23a					
	b	Other taxes, including self-emplo	yment ta	x, from Schedule	e 2 (Form 10	040),	23b					
	С	Transportation tax (see instructio					23c					
	d	Add lines 23a through 23c	-							23d		
	24	Add lines 22 and 23d. This is you								24		0.
Payments	25	Federal income tax withheld from										
,	а	Form(s) W-2				.	25a		73			
	b	Form(s) 1099				.	25b					
	С	Other forms (see instructions) .				.	25c					
	d	Add lines 25a through 25c								25d		73.
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2023 estimated tax payments and								26		
	27	Reserved for future use				- 1	27					
	28	Additional child tax credit from Se					28					
	29	Credit for amount paid with Form					29					
	30	Reserved for future use					30					
	31	Amount from Schedule 3 (Form 1				- 1	31					
	32	Add lines 28, 29, and 31. These a	,.			,		edits .		32		
	33	Add lines 25d, 25e, 25f, 25g, 26,	-							33		73.
Refund	34	If line 33 is more than line 24, sub								34		73.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here									35a		73.
Direct deposit?	b	Routing number 1 1 1 0			c Type:		Check	_	Savings			
See instructions.		Account number 4 8 8 1	 			ΙŢ		 				
		e 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 appli					36					
Amount	37	Subtract line 33 from line 24. This										
You Owe		For details on how to pay, go to a	www.irs.g	ov/Payments or	see instruct	tions .				37		
	38	Estimated tax penalty (see instruc	_			.	38					
Third		ou want to allow another person to				instruc	ctions		es. Com	plete be	low.	⊠ No
Party Designee	Designee's Phone Personal identiname no. Personal identiname no.							•				
	Under	penalties of perjury, I declare that I hav		d this return and ac				statemen	ts, and to			
Sign	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						an Identity					
Here	Prof						•	iter it here				
	Phon	e no.		Email address					1,0	- /		
Deid		arer's name	Preparer ³	's signature			Date		PTIN		Check	<pre>c if:</pre>
Paid		M PRIYA RAM SAGAR GUPTA	•	PRIYA RAM S	SAGAR CI	ן בידקן		26/2024		82703		elf-employed
Preparer		s name GLOBAL TAXES I		KAI'I K	J. 101111 GC	, <u></u>	00/2	,	Phone			65-9522
Use Only		s address 2/5 DOONEY O		TINICUIT OIZ NI	T 00016				Firm's		1019	03-3344

BAA

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information.

Sequence No. 7B

Your identifying number

MAN	IDEEP KARNE							834-54-39	927	
Enter a	amount of income und	ler the appropriate rate of tax. See instructions.								
		Nature of Income			(a) 10%	(b) 15%	(-) 200/	(d) Other (specify)		
		Nature of income			(a) 1070	(b) 1370	(c) 30%	%	%	
1	Dividends and divide	end equivalents:								
а	Dividends paid by U	.S. corporations		1a						
b	Dividends paid by fo	preign corporations		1b						
С	Dividend equivalent p	payments received with respect to section 871(m) trans	nsactions	1c						
2	Interest:									
а	Mortgage			2a						
b		orations		2b						
С				2c						
3		patents, trademarks, etc.)		3						
4	Motion picture or TV	copyright royalties		4						
5		rights, recording, publishing, etc.)		5						
6		e and natural resources royalties		6						
7		ties		7						
8		fits		8						
9	Capital gain from line 18 below			9						
10	Gambling—Resident	ts of Canada only. Enter net income in column (c).								
а	Winnings									
b	Losses			10c						
11	Gambling—Resident Note: Enter winnings	ts of countries other than Canada. s only. Losses aren't allowed		11						
12										
				12						
13		n 12 in columns (a) through (d)		13						
14		rate of tax at top of each column		14						
15	Tax on income not e	effectively connected with a U.S. trade or business.	Add colum	nns (a) th	nrough (d) of line 1	4. Enter the total here	and on Form 104	0-NR, line 23a 15		
		Capital Gains and I	Losses F	From S	Sales or Excha	anges of Propert	У			
		(b) Date acq 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).		
effectiv	ely connected with a U.S.									
or loss	ss. Do not include a gain on disposing of a U.S. real									
propert gains a	y interest; report these nd losses on Schedule D									
(Form 1										
Report	property sales or ges that are effectively									
connec	ted with a U.S. business	17 Add columns (f) and (g) of line 16					17	' ()		
	edule D (Form 1040),	18 Capital gain. Combine columns (f) and (g)								

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Attachment Sequence No. **7C**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name sh	Name shown on Form 1040-NR Your identifying number										
MANI	DEEP KARNE		834-54-39	927							
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 (lawful p	ermanent resident) 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 Ur	nited States?			☐ Yes	X No				
	If you answer "Yes" to (1) or (2										
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	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and	left the United States durin	g 2023. See instructio	ns.							
	Note: If you're a resident of C										
	check the box for Canada or	Mexico and skip to item I	<u> </u>	🗌 Canada	Mexico						
	Date entered United States	Date departed United Stat	es Da	te entered United State			Inited States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy					
			\perp								
Н	Give number of days (including 2021	, 2022	, and 202	23 <u>365</u>		_	_				
ı	Did you file a U.S. income tax If "Yes," give the latest year ar					⊠ Yes	∐ No				
J	Are you filing a return for a trust If "Yes," did the trust have a U.S. person, or receive a conti	st? . J.S. or foreign owner unde	r the grantor trust rule	es, make a distribution	or loan to a	☐ Yes	⊠ No □ No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax year? .			☐ Yes	⊠ No				
	If "Yes," did you use an alterna					☐ Yes	☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below	you are claiming exempt	ion from income tax u	under a U.S. income		a foreign	country,				
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the				
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		ount of exe					
	<u> </u>	E 4040 NB " " = =		1 2 4							
^	(e) Total. Enter this amount o										
	Were you subject to tax in a fo					∐ Yes	∐ No ⊠ No				
3.	Are you claiming treaty benefit	· ·	•			∐ Yes	⊠ No				
М	If "Yes," attach a copy of the C	Joinpetent Authority deterr	illiation letter to your i	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 propo	rty located in the Unit	ad States as off	factivaly o	nnected				
	with a U.S. trade or business u	under section 871(d). See in	nstructions				. 🗆				
2.	You have made an election in States as effectively connected										