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)

Taxpay	er s name	Social securi	ty num	ber			
RAH	UL NILESH THAKER	712-04	712-04-9703				
Spouse	's name	Spouse's soc	ial secu	urity number			
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (En	ter year you a	re au	thorizing.)			
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	35,411.			
2	Total tax		2	2,369.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,785.			
4	Amount you want refunded to you		4	1,416.			
5			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

•••	1 ddfhonzo			EBO firm name		E
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	4

4	9	7	0	3	as				
Enter five digits, but don't enter all zeros									

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

as mv Enter five digits, but don't enter all zeros

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 ►	Date 🕨
Practitioner PIN Me	thod Returns Only—continue below
Part III Certification and Authentication – Pra	ctitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur five-digit self-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 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 F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/04/24 PRO	Form 8879 (Rev. 01-2021)

1040	-	Department of the Treasury-Interr U.S. Nonresident Ali	nal Reven en Inc	ue Service Come Tax	Return	2023	OMB No. 15	645-0074	or staple	ly—Do not write in this space.
For the year Jan	. 1–0	Dec. 31, 2023, or other tax year beginn					,	20		separate ructions.
Your first name		Last na					Your id	our identifying number see instructions)		
RAHUL NIL	ESF	I	THAK	ER				712	-04-97	03
Home address (num	ber and street). If you have a P.O. box	, see inst	tructions.				1	/	Apt. no.
304 EAST	DAN	IIEL STREET								301
City, town, or po	ost o	ffice. If you have a foreign address, als	o compl	lete spaces be	elow.		State		ZIP code	Э
CHAMPAIGN							IL		61820	
Foreign country	nam	е	Foreign	n province/sta	te/county		Foreign	postal co	ode	
Filing Status Check only one box.	lf 	Single Married filing sepa you checked the QSS box, enter the c	hild's na	ame if the qua	lifying perso		ot your dep			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 qualifies	s for (see inst.):
(see instructions):		(1) First name Last name		(2) Depen identifying		(3) Relationship to	vou Chi	ld tax crea	ו זור	dit for other ependents
				, ,		(-)	,			
If more than four								$\overline{\Box}$		\square
dependents, see instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see ir	nstructions)				. 1a	ı	35,411.
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2				. 1b)	
Connected	С	Tip income not reported on line 1a (s	see instru	uctions) .				. 10	;	
With U.S.	d	Medicaid waiver payments not repor	ted on F	orm(s) W-2 (s	ee instructi	ons)		. 10	1	
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26				. 1e	•	
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line	29.			. 1f	:	
Attach	g	Wages from Form 8919, line 6						. 1g	ı	
Form(s) W-2,	h	Other earned income (see instruction						. 11	1	
1042-S,	i									
SSA-1042-S, RRB-1042-S,	j									
and 8288-A	k									
here. Also		line 1(e)	• •							<i><u>0</u> 1</i> 1 1 1 1 1 1 1 1 1
attach Form(s)	z	Add lines 1a through 1h	1							35,411.
1099-R if	2a	Tax-exempt interest 2a			1	able interest				
tax was withheld.	3a 4≏	Qualified dividends . . 3a IRA distributions . . 4a			1	nary dividends . able amount				
If you did not	4a 5a	Pensions and annuities			1	able amount				
get a Form	5a 6	Reserved for future use			1					
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								35,411.
-	10	Adjustments to income from Schedu								
		income	•				-)	
-	11	Subtract line 10 from line 9. This is y	our adju	sted gross ir	icome .			. 11		35,411.
	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		,		II		. 13	с	
-	14	Add lines 12 and 13c								13,850.
	15	Subtract line 14 from line 11. If zero								21,561.
For Disclosure, I	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate	instructions	3.			Form 10 4	10-NR (2023)

orm 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if an	y from Fo	rm(s): 1 🗌 88	814 2 497	2 3		16	2,369.
Credits	17	Amount from Schedule 2 (Form 1						. 17	0.
	18	Add lines 16 and 17							2,369.
	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	040), line	8				. 20	
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18. If z	ero or les	s, enter -0				. 22	2,369.
	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	ovment ta	x. from Schedul	e 2 (Form 1040).				
		line 21	-			23b			
	с	Transportation tax (see instruction				23c			
	d	Add lines 23a through 23c	,					. 23d	
	24	Add lines 22 and 23d. This is you							2,369.
ayments	25	Federal income tax withheld from						-	
. aj monto	a	Form(s) W-2				25a	3,78	35.	
	b	Form(s) 1099				25b	<u> </u>	<u> </u>	
	c	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						. 25d	3,785.
	e	Form(s) 8805							5,705.
	f	Form(s) 8288-A							
		Form(s) 1042-S							
	g								
	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	<i>,</i> .			31			
	32	Add lines 28, 29, and 31. These a							2 805
	33	Add lines 25d, 25e, 25f, 25g, 26,							3,785.
efund	34	If line 33 is more than line 24, sul						_	1,416.
	35a	Amount of line 34 you want refu							1,416.
ect deposit? e instructions.	b	Routing number 0 7 1 0			c Type: 🛛 🛛	Checking	Savir	ngs	
	d	Account number 8 8 6 0 2 0 8 2 2							
	е	If you want your refund check mailed to an address outside the United States not shown on page 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	•	2			• •	. 37	
	38	Estimated tax penalty (see instru	,			38			<u></u>
hird	Do yo	u want to allow another person to	discuss t	his return with th	e IRS? See instru	ctions. 🗌 Ye	es. C	omplete bel	ow. 🛛 No
arty	Desig			Phone				entification	
esignee	name	no number (PIN)							
		penalties of perjury, I declare that I hav they are true, correct, and complete. D							
ign									
-	Your	signature		Date	Your occupation				ent you an Identity PIN, enter it here
ere					STUDENT			(see inst.)	
	Phone			Email address			1	(
		rer's name	Preparer	's signature		Date	PTI	N	Check if:
aid	•		•	e	ርጠር የአተገለ			082703	Self-employed
reparer		PRIYA RAM SAGAR GUPTA TALLAM		TIA VAN DAGAN	R GUPTA TALLAM	03/17/2024			
•	Firm's name GLOBAL TAXES LLC Phone no						116110. (6	<u>78)965-9522</u>	
se Only		address 245 ROONEY C		TINIOUT CT	T 00016		 :	n's EIN 8	4-3171965

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

Sequence No. 7B Your identifying number

2

Attachment

712-04-9703

RAHUL NILESH THAKER

Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% (b) 15% (c) 30% % Dividends and dividend equivalents: 1 Dividends paid by U.S. corporations 1a а h 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c С 2 Interest: 2a а Paid by foreign corporations 2b b 2c С 3 3 4 4 Other royalties (copyrights, recording, publishing, etc.) 5 5 Real property income and natural resources royalties 6 6 . . 7 7 8 8 9 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings а 10c b Losses Gambling-Residents of countries other than Canada. 11 Note: Enter winnings only. Losses aren't allowed 11 Other (specify): 12

13 13 14 14 15

Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15

Capital Gains and Losses From Sales or Exchanges of Property

12

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												
property interest; report these												
gains and losses on Schedule D (Form 1040).												
. ,												
Report property sales or exchanges that are effectively												
connected with a U.S. business	17	17 Add columns (f) and (g) of line 16										
on Schedule D (Form 1040), Form 4797. or both.		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 18										

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

	Go to www.irs.gov/Form1040NR for instructions and the latest information. ternal Revenue Service Answer all questions.							o. 7C
Name s	hown on Form 1040	-NR		•	Ye	our identifyin		
RAHU	JL NILESH T	HAKER			5	12-04-9	9703	
Α	Of what country	or countries v	vere you a citizen or nationa	I 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 a	applied to be a	green card holder (lawful pe	ermanent resident) of	the United States? .		🗌 Yes	🛛 No
D	Were you ever:							
1.	A U.S. citizen?						Yes	🗙 No
2.	-		rmanent resident) of the Un				🗌 Yes	🗙 No
			2), see Pub. 519, chapter 4,					
E	immigration sta	tus on the last o	day of the tax year, enter y day of the tax year <u>F1</u>		·			
F			visa type (nonimmigrant stat the date and nature of the		on status?			🗙 No
G	List all dates yo	ou entered and	left the United States during	g 2023. See instructio	ns.			
			Canada or Mexico AND con			t intervals,		
	check the box	for Canada or	r Mexico and skip to item H	<u> </u>	🗌 Canada	Mexico		
		United States	Date departed United State	es Da	te entered United States	Date dep	parted Unite	d States
	mm/c	aa/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
						+		
						-		
н	Give number of	davs (including	vacation, nonworkdays, and		present in the United Sta	tes durina:		
••			, 2022					
I	Did you file a U	.S. income tax	return for any prior year? . nd form number you filed:					🗌 No
J	Are you filing a If "Yes," did the	return for a tru e trust have a l	st?	the grantor trust rule	es, make a distribution o	 r Ioan to a	☐ Yes	🛛 No
κ	Did you receive	total compens	ation of \$250,000 or more o	during the tax year? .			Yes	🗙 No
			ative method to determine t		•			🗌 No
L			f you are claiming exemption			c treaty wit	th a foreign	n country,
	• • • •	• • • •	/. See Pub. 901 for more inf					
1.			the applicable tax treaty arti ne columns below. Attach Fo			aimed the t	reaty benefi	it, and the
		•	intry			(4) (may not of av	amat
		(a) Cou	intry	(b) Tax treaty article	claimed in prior tax years		in current ta	
						+		
	(e) Total. Enter	r this amount o	n Form 1040-NR, line 1k. D	o not enter it anywher	re else on line 1			
			preign country on any of the				🗌 Yes	🗌 No
3.	-		ts pursuant to a Competent				Ves	🗙 No
			Competent Authority determ	nination letter to your	return.			
M	Check the appl			, .		.		
1.	This is the first	year you are m	aking an election to treat in	come trom real prope	rty located in the United	States as e	attectively c	onnected

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

BAA

REV 03/04/24 PRO Schedule OI (Form 1040-NR) 2023