(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

Subm	nission Identification Number (SID)					
Taxpay	yer's name	Social security	ocial security number			
SAF	RNALI SANFUI	713-06-	713-06-6757			
Spouse	e's name	Spouse's social security number				
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	er year you ar	e authoriz	zing.)		
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	19,937.		
2	Total tax		2	608.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2,513.		
4	Amount you want refunded to you		4	1,905.		
5	Amount you owe		5			
Part	t II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your	return)		
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transing my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for regy delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation reless days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the nal identification number (PIN) below is my signature for the income tax return (original or amended) I onic Funds Withdrawal Consent.	mitter, or electro- ejection of the tra U.S. Treasury ardicated in the tation to debit the tte the authoriza quests must be e processing of payment. I furti	nic return or ansmission, nd its design ax preparation entry to this tion. To revereceived on the electror her acknowless.	riginator (ERO) (b) the reason nated Financial on software for account. This toke (cancel) a o later than 2 nic payment of ledge that the		
Taxn	ayer's PIN: check one box only					
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN	6 7 5	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, i't enter all ze	but		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Your	signature Sarnali Sanfui Date	03/26/24				
Spou	use's PIN: check one box only					
. Г	I authorize to enter or generate	e my PIN		as my		
_	ERO firm name	,	er five digits,			
	signature on the income tax return (original or amended) I am now authorizing.	dor	i't enter all ze	eros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	W				
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO'	's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 :	2 7 1		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accord	dance with the		
EDO,	's signature ▶ Date ▶					
<u> </u>	's signature ► Date ► ERO Must Retain This Form — See Instructions					
	ENO IVIUSI NEIGIII TIIIS FOITII — SEE IIISTIUCIIONS					

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 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				ning, 2023, ending, 20					See separate instructions.	
Your first name and middle initial			Last name					Your identifying number (see instructions)		
Home address (number and street). If you have a P.O. box				tructions.					Apt. no.	
311 STASN									1415	
City, town, or post office. If you have a foreign address, also complete spaces below.								ZIP	code	
COLLEGE S						TX			840	
Foreign country	nam	е	Foreigr	n province/state/county		Foreign	postal c	ode		
	1									
Filing	☐ Single ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐								☐ Trust	
Status	If	endent:								
Check only one box.										
	Δta	ny time during 2023, did you: (a) recei	ve las a	reward award or navm	ent for property or se	arvices).	or (h) sel	evcl	nange or	
Digital Assets		erwise dispose of a digital asset (or a f								
Dependents						(4) Cl	neck the b	ox if q	ualifies for (see inst.):	
(see instructions):		(N.=.		(2) Dependent's	(2) 7	Ch	hild tax credit		Credit for other	
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou			dependents	
If more than four										
dependents, see										
instructions and check here										
	1a	Total amount from Form(s) W-2, box	, 1 (soo i	netructions)			. 1	<u>. T</u>	 19 , 937.	
Income	b	Household employee wages not rep	,	,			_		10,007.	
Effectively Connected	C	Tip income not reported on line 1a (s								
With U.S.	d	Medicaid waiver payments not report		,						
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit		•			. 1			
Dusiness	g g	Wages from Form 8919, line 6	. 1							
Attach	h	Other earned income (see instruction					. 1			
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use								
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040-NR),	item L,					
here. Also		line 1(e)			1k					
attach	z	Add lines 1a through 1h		,			. 1	z	19,937.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a		b Tax	xable interest		. 2	_		
tax was	3a	Qualified dividends 3a	1	b Ord	dinary dividends .		. 3	b L		
withheld.	4a	IRA distributions 4a			xable amount			b		
If you did not get a Form	5a	Pensions and annuities 5a			xable amount					
W-2, see	6	Reserved for future use		_						
instructions.	7	Capital gain or (loss). Attach Schedu								
	8	Additional income from Schedule 1 (Form 1040), line 10							10 027	
	9			<u>'</u>	19,937.					
	10	Adjustments to income from Sched income	,	**	•			,		
	11				19,937.					
	12	,							± <i>J</i> , <i>J</i> , <i>J</i> , <i>J</i> , .	
	14	deduction (see instructions)			2	13,850.				
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts or								
	c	Add lines 13a and 13b					. 13	c		
	14								13,850.	
	15	Subtract line 14 from line 11. If zero	. 1	5	6,087.					

Form 1040-NR (2023)											Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	314 2 [4972	2 3			16		608.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17		0.
	18	Add lines 16 and 17								18		608.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)										
	20	Amount from Schedule 3 (Form 1040), line 8										
	21	Add lines 19 and 20										
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0						22		608.
	23a	Tax on income not effectively co	nnected w	ith a U.S. trade	or business f	from						
		Schedule NEC (Form 1040-NR),	line 15 .			. [23a					
	b	Other taxes, including self-emple	oyment ta	x, from Schedul	e 2 (Form 10)40),						
		line 21				. [23b					
	С	Transportation tax (see instruction	ons)				23c					
	d	Add lines 23a through 23c								23d		
	24	Add lines 22 and 23d. This is you	ur total ta :	x						24		608.
Payments	25	Federal income tax withheld from	m:									
-	а	Form(s) W-2				. [25a		2 , 513.			
	b	Form(s) 1099					25b					
	С	Other forms (see instructions) .					25c					
	d	Add lines 25a through 25c								25d		2,513.
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2023 estimated tax payments ar	nd amount	applied from 20	22 return .					26		
	27	Reserved for future use				. [27					
	28	Additional child tax credit from S	Schedule 8	8812 (Form 1040))		28					
	29	Credit for amount paid with Forn	n 1040-C				29					
	30	Reserved for future use					30					
	31	Amount from Schedule 3 (Form 1040), line 15										
	32 Add lines 28, 29, and 31. These are your total other payments and refundable credits									32		
-	33	Add lines 25d, 25e, 25f, 25g, 26,	, and 32. T	hese are your to	tal paymen	ts .				33		2,513.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the a	amount	you c	verpaid		34		1,905.
	35a	Amount of line 34 you want refu							🗆	35a		1,905.
Direct deposit?	b	Routing number 1 1 1 0			c Type:	X (Check	ing \Box	Savings			
See instructions.	d	Account number 9 6 2 9	9 8 5	2 0 3								
	е	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 app	lied to you	ur 2024 estimat	ed tax .		36					
Amount	37	Subtract line 33 from line 24. Thi		-								
You Owe		For details on how to pay, go to	_	-		ions .				37		
	38											
Third	Do you want to allow another person to discuss this return with the IRS? See instructions. Yes. Complete below										low.	⊠ No
Party	Designee's Phone Personal identif							fication				
Designee	namenonumber (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and											
Cian	belief,	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which									,	
Sign	Your	signature	Date Your occupation							•	u an Identity	
Here	POSTDOCTORAI.					יחם זעק	Protection PIN, enter (see inst.)				ner it nere	
+	Phone	e no		Email address	TODIDOCION	ישח ויקיו	OHANC.	I DOSCI	1711 (266	, 11131.)		
		e no. arer's name	Preparer	Email address er's signature Date					PTIN		Chec	k if:
Paid	•		·	PRIYA RAM S	באכאף כיי	ן גייים		6/2024	P0208	2703	l	elf-employed
Preparer		M PRIYA RAM SAGAR GUPTA		LILLA KAN	טט אאטגיע	TIM	03/2	0/2024				
Use Only	Firm's name GLOBAL TAXES LLC Phone no								10)9	65-9522		

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

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number SARNALI SANFUI 713-06-6757 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income					(a) 10%	(b) 15%	(-) 200/	(d) Other	er (specify)	
	Nature of income				(a) 10%	(a) 15%	(c) 30%	%	%	
1	Dividends and divide	end equ	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	Dividends paid by foreign corporations								
С	Dividend equivalent p	equivalent payments received with respect to section 871(m) transactions								
2	Interest:	•	, ,							
а	Mortgage				2a					
b	Paid by foreign corpo	oration	s		2b					
С					2c					
3			, trademarks, etc.)		3					
4	Motion picture or TV	copyri	ight royalties		4					
5			recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8					8					
9	Capital gain from line	e 18 be	elow		9					
10	Gambling-Resident	ts of Ca	anada only. Enter net income in column (d							
	If zero or less, ente									
a	Winnings				10-					
ь 11	Losses		· · · · · · · · · · · · · · · · · ·		10c					
"	Note: Enter winnings	s only.	Losses aren't allowed		11					
12										
					12					
13			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	ffective	ely connected with a U.S. trade or busine	ss. Add colum	ns (a)	through (d) of line 1	4. Enter the total here	e and on Form 1040	-NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	anges of Proper	ty		_
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not 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		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).
(Form 1	•									
exchan	property sales or ges that are effectively							<u> </u>		
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17	Add columns (f) and (g) of line 16 .					17	()	
		18 (Capital gain. Combine columns (f) and	(g) of line 17	. Ente	r the net gain her	e and on line 9 ab	ove. If a loss, ente	r -0 18	

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.

Answer all questions.

OMB No. 1545-0074

2023
Attachment

Internal Revenue Service Sequence No. 7C Name shown on Form 1040-NR Your identifying number SARNALI SANFUI 713-06-6757 Of what country or countries were you a citizen or national during the tax year? _INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Were you ever: ⊠ No Yes 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε 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. X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes 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. G Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States **Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 ______, 2022 ______, and 2023 ______365 ____. Did you file a U.S. income tax return for any prior year? X Yes □ No ı If "Yes," give the latest year and form number you filed: 1040NR X No ☐ Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a No Yes Κ Yes ⊠ No If "Yes," did you use an alternative method to determine the source of this compensation? ☐ No Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 . . . 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? No Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 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