#### 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.

Social accurity number

Submission Identification Number (SID)

Taypayar'a nama

Taxpay	ver s hame	Social secur	ity numi	Jer			
ATH	IARVA SANDEEP PARTE	687-06-6307					
Spous	e's name	Spouse's so	cial secu	urity number			
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you a	are 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	16,455.			
2	Total tax		2	261.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	629.			
4	Amount you want refunded to you		4	368.			
5	Amount you owe		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

				FBO firm name		Er
	I authorize	GLODAL	TAVES		to enter or generate my PIN	_
$\mathbf{v}$	l authorize	CTORAT	TAVEC	TTC	to optor or gonorato my DIN	6

6 Ent	6 er fiv	5	0 nits	7 but	as my
don	n't er				

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.

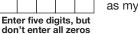
Your signature 🕨

Date

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN



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.

Du											
Practitioner PIN Method Returns Only—continue below											
nly											
1.	2	2							2	7	1
	inue nly	inue bele nly	nly	inue below nly	inue below hly J. 2 2 2 4	inue below     hly     J.   2   2   2   4   9	inue below hly J. 2 2 2 4 9 6	inue below     Ily     J.   2   2   2   4   9   6   0	inue below hly	inue below     Ily     J.   2   2   2   4   9   6   0   8   2	inue below     Inly     J.   2   2   2   4   9   6   0   8   2   7

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 Poduction Act Nation son your tax r	oturn instructions	REV 03/07/24 RRO	Eorm 8879 (Boy 01-2021)							

<b>1040</b>	)-	VR Department of the Treasury-Inter U.S. Nonresident Al	rnal Revenu ien Inc	e Service Come Tax Retur	n 20 <b>23</b>	OMB No. 1	545-0074	or stap	Only-Do not write ple in this space.	
For the year Jan. 1-Dec. 31, 2023, or other tax year beginn				ning , 2023, ending					See separate nstructions.	
Your first name and middle initial				Last name Your identifying num (see instructions)						
ATHARVA SANDEEP				2			687	-06-6	5307	
Home address	(nun	ber and street). If you have a P.O. box	, see insti	ructions.					Apt. no.	
		INT TER HOBOKEN								
City, town, or p	ost o	ffice. If you have a foreign address, al	so comple	ete spaces below.		State		ZIP co		
HOBOKEN			1			NJ		0703	30	
Foreign country	nar	le	Foreign	province/state/county		Foreign	postal c	ode		
Filing Status Check only one box.		Single Married filing separation of the Separation of the Married filing separation of the Separation		-	Trust					
Digital Assets	At oth	any time during 2023, did you: (a) rece erwise dispose of a digital asset (or a t	ive (as a r financial ir	eward, award, or paym nterest in a digital asse	ent for property or t)? (See instruction	services); c s.)	or (b) sell	exchar	nge, or Yes 🔀 No	
Dependents						<b>(4)</b> Cł	eck the b	ox if quali	fies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to	vou Ch	Child tax cre		edit Credit for other dependents	
				, 0	(c) · · · · · · · · · · · · · · · · · · ·	,				
If more than four										
dependents, see instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	k 1 (see in	structions)			. 1a	3	16,455.	
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2...			. 11	<b>&gt;</b>		
Connected	С	Tip income not reported on line 1a (	see instru	ctions)			. 10	>		
With U.S.	d	Medicaid waiver payments not repo					. 10	1		
Trade or	е	Taxable dependent care benefits fro					. 10			
Business	f	Employer-provided adoption benefit								
Attach	g	Wages from Form 8919, line 6					. 19			
Form(s) W-2,	h :	Other earned income (see instructio	,				. 11	1		
1042-S, SSA-1042-S,	i	Reserved for future use					- 1			
RRB-1042-S, and 8288-A here. Also	j k	Total income exempt by a treaty from line 1(e)	m Schedu	ıle OI (Form 1040-NR), i	tem L,		. <u>1</u>			
attach	z	Add lines 1a through 1h					. 1:	z	16,455.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	<b>b</b> Tax	able interest		. 21	<b>b</b>	i	
tax was	3a	Qualified dividends 3a	a	b Ord	dinary dividends .		. 31	<b>b</b>		
withheld.	4a	IRA distributions 4a	а 📃	<b>b</b> Tax	able amount		. 41	<b>&gt;</b>		
If you did not	5a	Pensions and annuities 5a	a	<b>b</b> Tax	able amount		. 51	<b>)</b>		
get a Form W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Schedu	•		•					
	8	Additional income from Schedule 1								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		-					16,455.	
	10						. 10	)		
	11	Subtract line 10 from line 9. This is y						I	16,455.	
	12	Itemized deductions (from Schedu deduction (see instructions)			Std Dedn US			2	13,850.	
	13a	Qualified business income deductio								
	b	Exemptions for estates and trusts o		,						
	С	Add lines 13a and 13b							10 0	
	14								13,850.	
	15 Datio	Subtract line 14 from line 11. If zero					. 1		2,605.	

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

Form **1040-NR** (2023)

Form 1040-NR (2	2023)		Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s):   1   8814   2   4972   3	<b>16</b> 261.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17 0.
	18	Add lines 16 and 17	<b>18</b> 261.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	19
	20	Amount from Schedule 3 (Form 1040), line 8	20
	21	Add lines 19 and 20	21
	22	Subtract line 21 from line 18. If zero or less, enter -0	<b>22</b> 261.
	23a	Tax on income not effectively connected with a U.S. trade or business from   Schedule NEC (Form 1040-NR), line 15	
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),	
	-	line 21 . </th <th>-</th>	-
	C		
	d	Add lines 23a through 23c   . <th>23d</th>	23d
<b>—</b>	24	Add lines 22 and 23d. This is your <b>total tax</b>	<b>24</b> 261.
Payments	25	Federal income tax withheld from:	
	a	Form(s) W-2	-
	b	Form(s) 1099   25b     Other forms (register stime)   25c	-
	C	Other forms (see instructions)   . <th< th=""><th></th></th<>	
	d	Add lines 25a through 25c	<b>25d</b> 629.
	e	Form(s) 8805	25e
	f	Form(s) 8288-A	25f
	g	Form(s) 1042-S	25g
	26	2023 estimated tax payments and amount applied from 2022 return	26
	27	Reserved for future use   27	4
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28	-
	29	Credit for amount paid with Form 1040-C	-
	30	Reserved for future use   30     30   31	4
	31	Amount from Schedule 3 (Form 1040), line 15	
	32	Add lines 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	32
<u> </u>	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total payments</b>	<b>33</b> 629.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b> 368.
D' I I '10	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	<b>35a</b> 368.
Direct deposit? See instructions.	b	Routing number   0   2   1   2   0   2   3   3   7   c Type:   C Checking   Savings	
	d	Account number 8 8 9 1 7 1 3 3 3 9	
	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 to your 2024 estimated tax 36	
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .	
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37
	38	Estimated tax penalty (see instructions)	
Third	Do yo	bu want to allow another person to discuss this return with the IRS? See instructions.	lete below. 🛛 No
Party Designee	Desig name		ication
		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the 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 If the	e IRS sent you an Identity
Here			ection PIN, enter it here
		SOFTWARE ENGINNER (see	inst.)
	Phone		
Paid	Prepa	arer's name Preparer's signature Date PTIN	Check if:
Preparer	SYAM	4 PRIYA RAM SAGAR GUPTA   SYAM PRIYA RAM SAGAR GUPTA   03/25/2024   P02082	
Use Only	Firm's	s name GLOBAL TAXES LLC Phone n	<b>10.</b> (678)965-9522
	Firm's	s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E	IN
Go to www.irs.g	gov/Foi	rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form <b>1040-NR</b> (2023)

### SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Internal Revenue Service Name shown on Form 1040-NR

Sequence No. 7B Your identifying number

2

Attachment

687-06-6307

ATHARVA SANDEEP PARTE

Enter a	amount of income und	er the	appropriate rate of tax. See instructions.						_	
	Nature of Income					<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Othe	er (specify)
				_	(a) 1070	(6) 1070	(0) 0070	%	%	
1	Dividends and divide									
а	Dividends paid by U		-		<b>1</b> a					
b		-	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m) tr	ransactions	1c					
2	Interest:									
а					2a					
b	Paid by foreign corp	oratio	าร		2b					
С					2c					
3			s, trademarks, etc.)		3					
4			ight royalties		4					
5		-	, recording, publishing, etc.)		5					
6			natural resources royalties		6					
7					7					
8	-				8					
9	Capital gain from line 18 below			9						
10	If zero or less, ente	r -0	anada only. Enter net income in column (c)	).						
а	Winnings									
b			<u> </u>		10c					
11	Gambling-Resident	ts of c	ountries other than Canada.		11					
12										
					12					
13			columns (a) through (d)		13					
14	-		tax at top of each column		14					
15			ely connected with a U.S. trade or busines			through (d) of line 1	4. Enter the total here	and on Form 1040	D-NR. line 23a 15	
			Capital Gains and						,	1
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>(b)</b> Date acq mm/dd/yy		<b>(c)</b> 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).
	ely connected with a U.S. s. Do not include a gain									
or loss	on disposing of a U.S. real v interest; report these									
gains a	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),	17	Add columns (f) and (g) of line 16	•••	· _·			17		)
	797, or both.	18	Capital gain. Combine columns (f) and (	g) of line 17	7. Ente	er the net gain he	re and on line 9 abo	ove. If a loss, ent	er -0 <b>18</b>	

SCHE	DUL	e oi
(Form	1040-	NR)

## **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 Sequence No. 7C

Department of the Treasury Internal Revenue Service								
Name shown on Form 1040								

Name sł	nown on Form 1040-NR				Your identifying number							
ATHA	RVA SANDEEP PARTE				687-06-6307							
Α	Of what country or countries v	-										
в	In what country did you claim											
С		green card holder (lawful p	permanent resident) of	the United States? .	🗌 Yes 🛛 No	,						
D	Were you ever:											
	A U.S. citizen?											
2.	2. A green card holder (lawful permanent resident) of the United States?											
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.											
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. $F_1$											
F												
G	List all dates you entered and <b>Note:</b> If you're a resident of C <b>check the box for Canada o</b>	anada or Mexico AND cor	g 2023. See instruction mmute to work in the	ns. United States at frequ								
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es Da	te entered United State mm/dd/yy	s Date departed United States mm/dd/yy	;						
						_						
			—			-						
						-						
н	Give number of days (including 2021											
	Did you file a U.S. income tax	, 2022, return for any prior year?	, and 202	23365								
•	If "Yes," give the latest year ar	nd form number you filed:										
J	Are you filing a return for a true	st?			🗌 Yes 🛛 No	)						
	If "Yes," did the trust have a	U.S. or foreign owner unde	er the grantor trust rule	es, make a distributior	or loan to a							
	U.S. person, or receive a cont	ribution from a U.S. person	?		· · · · 🗌 Yes 🗌 No	)						
Κ	Did you receive total compens											
	If "Yes," did you use an alterna											
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with a foreign countr	у,						
1.	Enter the name of the country, amount of exempt income in th				claimed the treaty benefit, and the	ıe						
	<b>(a)</b> Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye								
						_						
						_						
	(a) Total Enter this amount a	n Form 1040 ND line 14	 			_						
2.	(e) Total. Enter this amount o Were you subject to tax in a fo				🗌 Yes 🗌 No	_						
	Are you claiming treaty benefit	• • •	. ,		Yes 🛛 No							
0.	If "Yes," attach a copy of the (		•									
м	Check the applicable box if:	, , , , , , , , , , , , , , , , , , , ,	- <b>,</b>									
1.		aking an election to treat ir	come from real prope	rty located in the Unite	ed States as effectively connected	эd						
	with a U.S. trade or business u				L							
2.	You have made an election in States as effectively connecte				al property located in the Unite	ek }						
For Pa	perwork Reduction Act Notice,		rm 1040 ND	REV 03/07/24 PRO	Schedule OI (Form 1040-NR) 20	23						