#### 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 secu	rity numb	er
BHA	VESH CHATNANI	697-54-1201		
Spouse	's name	Spouse's so	cial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you	are aut	horizing.)
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	29,661.
2	Total tax		2	1,679.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1,988.
4	Amount you want refunded to you		4	309.
5	Amount you owe		5	
Dow	Townsyser Declaration and Signature Authorization (Resource you get and			

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

4	1	2	0	1	as			
Enter five digits, but don't enter all zeros								

my

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.

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 Date								
Practitioner PIN Method Returns Only—continu	e bel	ow						
Part III Certification and Authentication – Practitioner PIN Method Only								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	 	 	0 III zer	 2 7	1	

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 03/07/24 PRO	Form 8879 (Rev. 01-2021)

<b>1040</b>	-N	<b>IR</b> Department of the Treasury-Intern U.S. Nonresident Ali	nal Reven <b>en In</b> e	ue Service come Tax R	eturn	2023	OMB No. 15	45-0074		
For the year Jan	. 1–D	ec. 31, 2023, or other tax year beginn	ing		2023, er	nding	,	20		eparate
								Your id	dentifying n	
BHAVESH			CHAT	NANI				697	-54-1202	1
Home address (	num	per and street). If you have a P.O. box	, see ins	tructions.					Ap	ot. no.
304 E DAN	IEL	ST							30	)3
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces belov	/.		State		ZIP code	
CHAMPAIGN							IL		61820	
Foreign country	U40-NMK U.S. Nonresident Alien Income Tax Return   2023   OMB No. 1545-003     the year Jan. 1–Dec. 31, 2023, or other tax year beginning   , 2023, ending   , 20     ir first name and middle initial   Last name   You     IAVESH   CHATNANI   65     ne address (number and street). If you have a P.O. box, see instructions.   04   E DANIEL ST     /, town, or post office. If you have a foreign address, also complete spaces below.   State     IAMPAIGN   IL     eign country name   Foreign province/state/county   Foreign postal     ing   Single   Married filing separately (MFS)   Qualifying surviving spouse (QSS)   IL     if you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent box.   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instructions.)   (4) Check the Child tax Context in a digital asset? (See instru		postal co	ode						
Filing Status Check only one box.	lf :	you checked the QSS box, enter the c	hild's na	ame if the qualifyin	ng persoi	n is a child but no	ot your dep	endent:		] Trust
Digital Assets										
Dependents							<b>(4)</b> Ch	eck the bo	ox if qualifies fo	or (see inst.):
(see instructions):		(1) First name Last name				(3) Relationship to	Chi		tit Credit	t for other endents
If more than four										<u> </u>
dependents, see										<u> </u>
	4 -		1 (							
			•	,						9,661.
•										
		•		-						
Dusiness										
Attach		<b>0</b>								
•••									•	
SSA-1042-S,	i							. 1i		
RRB-1042-S, and 8288-A	, k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040	-NR), ite	m L,				
attach	z							. 1z	29	9,661.
Form(s)	2a	-	1							<u> </u>
	3a	· ·								
withheld.	4a	IRA distributions 4a	1						,	
If you did not	5a	Pensions and annuities <b>5a</b>	1						,	
get a Form	6	Reserved for future use						. 6		
	7	Capital gain or (loss). Attach Schedu	le D (Foi	rm 1040) if require	ed. If not	required, check	here	7		
	8	Additional income from Schedule 1 (	Form 10	040), line 10 .				. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effect	ively cor	nnected income		. 9	29	9,661.
If you did not get a Form W-2, see instructions.5aPensions and annuities5abTaxable6Reserved for future use7Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not rec8Additional income from Schedule 1 (Form 1040), line 109Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively conner10Adjustments to income from Schedule 1 (Form 1040), line 26. These are	•	-								
	and year and middle initial   Last name   Vour identifying n (see instructions)   Your identifying n (see instructions)     ATESH   CHATTNANT   G9 7 5 4 - 12 0:     AVECH   CHATTNANT   G9 7 5 4 - 12 0:     a ddress (number and street), if you have a P.O. box, see instructions.   State   ZIP Code     a ddress (number and street), if you have a P.O. box, see instructions.   State   ZIP Code     a group of the instruction is a child but not your dependent:   It   Estate   It     instruction is a child but not your dependent:   It   Single   Married filing separately (MFS)   Qualifying surviving spouse (QSS)   Estate   It     It   You checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:   It   It was the out and the out and your dependent:   It was the out and your dependent:     It a lassets   At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or (child tax credit child tax credit childs in the a digital asset (receins inductions).   It   It a 225     It a tara name   (a) Dependent's (a) Reationabje to you   It a 225   It a 225     It otal amount from Forn(s) W-2, box 1 (see instructions).   It a 225   It a 226   It a 226  <	9,661.								
Dependents (see instructions): If more than four dependents, see instructions and check here Income Effectively Connected With U.S. Trade or Business Attach Form(s) W-2, 1042-S, SSA-1042-S, RRB-1042-S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. 10 10 11 12 13	12	Itemized deductions (from Schedu	le A (Fo	rm 1040-NR)) or,	for certa	in residents of Ir	ndia, standa	ard	1	3,850.
	13a					1 1				
		•	•	,				. 13	c	
										3,850.
										5,811.

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	16	1,679.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17	0.
	18	Add lines 16 and 17	18	1,679.
	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	22	1,679.
	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		
	с	Transportation tax (see instructions)		
	d	Add lines 23a through 23c	23d	
	24	Add lines 22 and 23d. This is your <b>total tax</b>	24	1,679.
Payments	25	Federal income tax withheld from:		
raymento	а	Form(s) W-2		
	b	Form(s) 1099	-	
	c	Other forms (see instructions)     .     .     .     .     .     .     .     25c	-	
	d	Add lines 25a through 25c	25d	1,988.
	e	Form(s) 8805	25e	1,000.
	f	Form(s) 8288-A	25e	
			25g	
	g 26	Form(s) 1042-S     .      .     .	25g	
			20	
	27	Reserved for future use     27       Additional shild tau and it form Onbody is 0010 (Form 10.10)     20	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       August form 0. both to 0./Form 10.100 line 15     21	4	
	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	1 000
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total payments</b>	33	1,988.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	309.
<b>D</b>	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	309.
Direct deposit? See instructions.	b	Routing number     0     7     1     0     0     0     1     3     c Type:     □     Checking     ⊠ Savings		
	d	Account number 3 9 5 5 7 7 2 9 7 6		
	е	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.		
	36	enter it here.     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. $\hfill \square$ Yes. Comp	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 th	e IRS sent	you an Identity
Here				I, enter it here
		STUDENT (see	e inst.)	
	Phon			
Paid	Prepa	arer's name Preparer's signature Date PTIN		heck if:
Preparer	SYAN	1 PRIYA RAM SAGAR GUPTA   SYAM PRIYA RAM SAGAR GUPTA   04/03/2024   P0208	2703   L	Self-employed
Use Only	Firm's	s name GLOBAL TAXES LLC Phone r	<u>io. (678</u>	)965-9522
	Firm's	s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E	.IN	
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form	1040-NR (2023)

SCHEDULE NEC	
(Form 1040-NR)	

# 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.

Department of the Treasury Internal Revenue Service Name shown on Form 1040-NR BHAVESH CHATNANI

Sequence No. 7B Your identifying number

2

Attachment

697-54-1201

Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	( <b>c)</b> 30%	<b>(d)</b> Other	er (specify)	
			(a) 1070		(b) 13%	(C) 30%	%	%	
1	Dividends and dividend equivalents:								
а	Dividends paid by U.S. corporations	. [	1a						
b	Dividends paid by foreign corporations		1b						
с	Dividend equivalent payments received with respect to section 871(m) transact	ions	1c						
2	Interest:								
а	Mortgage		2a						
b	Paid by foreign corporations		2b						
с	Other		2c						
3	Industrial royalties (patents, trademarks, etc.)		3						
4	Motion picture or TV copyright royalties		4						
5	Other royalties (copyrights, recording, publishing, etc.)		5						
6	Real property income and natural resources royalties		6						
7	Pensions and annuities		7						
8	Social security benefits		8						
9	ridends and dividend equivalents:     ridends paid by U.S. corporations     ridends paid by foreign corporations     ridend equivalent payments received with respect to section 871(m) transa     erest:     ortgage     ortgage     id by foreign corporations     id by foreign corporations     ner     id by foreign corporations     ner     ustrial royalties (patents, trademarks, etc.)     ner     ustrial royalties (copyrights, recording, publishing, etc.)     al property income and natural resources royalties     nsions and annuities     cial security benefits     cial security benefits     minings     minings     minings     sees     minings     minings     minings     minings     minings     minings     minings     cere or less, enter -0     nnnings     minings     minings     cere or less, enter -0     nnings     minings     minings     cere or less, enter -0		9						
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0								
а	Winnings								
b	Losses	• L	10c						
11	Note: Enter winnings only. Losses aren't allowed		11						
12	Other (specify):								
			12						
13	Add lines 1a through 12 in columns (a) through (d)	_	13						
14			14						
15	Tax on income not effectively connected with a U.S. trade or business. Add	column	s (a) t	hrough (d) of line 14	. Enter the total here	e and on Form 1040-	NR, line 23a <b>15</b>		
	Capital Gains and Los	ses Fr	om	Sales or Excha	nges of Proper	ty			
losses f exchan within t	from property sales or nges that are from sources the United States and not descriptive details not shown below)	te acquir i/dd/yyyy		<b>(c)</b> Date sold mm/dd/yyyy	(d) Sales price	<b>(e)</b> Cost or other basis	<b>(f) LOSS</b> If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).	
	vely connected with a U.S. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
gains a	nd losses on Schedule D								
(Form 1									
exchan	property sales or get that are effectively								
	edule D (Form 1040), 17 Add columns (f) and (g) of line 16								
	4797, or both. <b>18 Capital gain.</b> Combine columns (f) and (g) of li	ne 17.	Ente	r the net gain here	e and on line 9 abo	ove. If a loss, enter	<sup>-</sup> -0 <b>18</b>		

### SCHEDULE OI (Form 1040-NR)

## **Other Information**

Attach to Form 1040-NR.

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

OMB No. 1545-0074

	Revenue Service	Ansı	wer all questions.			Attachment Sequence N	o. <b>7C</b>
Name sł	nown on Form 1040-NR				Your identifyi		
BHAV	ESH CHATNANI				697-54-	1201	
Α	Of what country or countries v	vere you a citizen or nationa	al during the tax year	? INDIA			
в	In what country did you claim						
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) o	f the United States? .		2 Yes	🛛 No
D	Were you ever:						
							🗙 No
2.	A green card holder (lawful pe	rmanent resident) of the Un	ited States?			Yes	🗙 No
	If you answer "Yes" to (1) or (2		•				
Е	If you had a visa on the last		our visa type. If you	didn't have a visa, en	ter your U.S.		
	immigration status on the last	· · · · · · · · · · · · · · · · · · ·					
F	Have you ever changed your	visa type (nonimmigrant stat	tus) or U.S. immigrati	on status?		∐ Yes	🔀 No
-	If you answered "Yes," indicat	te the date and nature of the	e change:				
G	List all dates you entered and		-				
	Note: If you're a resident of C check the box for Canada or				ient intervais.		
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es D	ate entered United State mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States
						· · · · <b>, ,</b>	
н	Give number of days (including	vacation, nonworkdays, and	I partial days) you wer	e present in the United	States during		
	2021	, 2022	, and 20	301	·		
I	Did you file a U.S. income tax	return for any prior year? .					🗌 No
	If "Yes," give the latest year an	nd form number you filed:	10	40NR		- <u> </u>	_
J	Are you filing a return for a tru						🗙 No
	If "Yes," did the trust have a U.S. person, or receive a cont						<b>—</b>
v							∐ No ⊠ Na
K	Did you receive total compens If "Yes," did you use an altern						⊠ No □ No
L	Income Exempt From Tax-I			•			
-	complete (1) through (3) below				tax ficaty wi	in a loreign	roountry
1.	Enter the name of the country,				claimed the	treatv benefi	t. and the
	amount of exempt income in th					,	,
	<b>(a)</b> Cou	Intry	(b) Tax treaty article			mount of exe	empt
				claimed in prior tax ye	ars income	e in current ta	ax year
	(e) Total. Enter this amount o	n Form 1040 ND line 14 D	o not optor it op auto	l line 1			
2	Were you subject to tax in a fo		-			Yes	No
	Are you claiming treaty benefi						
0.	If "Yes," attach a copy of the (		-				
м	Check the applicable box if:						
	This is the first year you are m	aking an election to treat in	come from real prope	erty located in the Unit	ed States as	effectivelv c	onnecter
	with a U.S. trade or business u						

BAA

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

REV 03/07/24 PRO Schedule OI (Form 1040-NR) 2023