## 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

Subm	nission Identification Number (SID)				
Taxpay	er's name	Social securit	y number		
NIH	ARIKA SANTOSH GADHAVE	855-94-2585			
Spouse	s's name	Spouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re autho	orizing.)	
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	4,	724.
2	Total tax		2		0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		169.
4	Amount you want refunded to you		4		169.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of you	ur retur	<u>n)</u>
return to sen for any Agent payme author payme busine taxes persor	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject of delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial transplant of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutionization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises 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 payment (PIN) below is my signature for the income tax return (original or amended) I authorize Unids Withdrawal Consent.	tter, or electro- ection of the tr S. Treasury are cated in the ta in to debit the the authoriza- lests must be processing of ayment. I furt	nic return ansmission and its des ax prepar entry to tition. To received the election	n originate on, <b>(b)</b> the signated Fration soft this accourevoke (cd no later tronic paylowledge	or (ERO) e reason inancial ware for unt. This ancel) a than 2 ment of that the
	ayer's PIN: check one box only				
-	I authorize GLOBAL TAXES LLC to enter or generate	my PIN 4	2 5	8 5	as my
Ľ	Signature on the income tax return (original or amended) I am now authorizing.	Ent	er five dig n't enter a		ao my
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Your	signature ▶ Date ▶				
Snou	se's PIN: check one box only				
Ороц	I authorize to enter or generate	my DINI			ac my
	ERO firm name		er five dig	uits but	as my
	signature on the income tax return (original or amended) I am now authorizing.		i't enter a		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
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. 2 2	2 4 9 Don't ente	6 6 1 er all zero		9
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income to the file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of Ir	itting this retu	rn in acc	cordance	
FR∩'	s signature ▶ Date ▶				
<u></u>	ERO Must Retain This Form — See Instructions				
	<b>LIV MUSE RELATE THIS FORM — SEE HISH UCLIONS</b>				

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					instructions.			
Your first name and middle initial			Last name Y					our identifying number			
NITHER THE COMMON!								(see instructions)			
NIHARIKA SANTOSH				AVE			855-9	94-2585			
Home address (number and street). If you have a P.O. box, see instructions.								Apt. no.			
1040 IRVI				lata and a lata		01-1-	1-	1			
City, town, or post office. If you have a foreign address, also complete spaces below.								ZIP code			
DAYTON OH  Foreign country name Foreign province/state/county Foreign posta								45419			
Foreign country name Foreign province/state/county						Foreign p	ostai code	e			
								_			
Filing Status		Single Married filing sepa	rately (N	MFS) Qualifyii	ng surviving spouse	(QSS)	☐ Esta	ate 🗌 Trust			
	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depend										
Check only one box.											
Digital Assets	At a	ny time during 2023, did you: (a) recei	ve (as a	reward, award, or paym	ent for property or se	ervices): or	(b) sell, e	xchange, or			
2.g.ta. 7.00010		erwise dispose of a digital asset (or a f									
Dependents						(4) Che	ck the box i	if qualifies for (see inst.):			
(see instructions):		(4) First name		(2) Dependent's identifying number	(a) Dalationalis to the		d 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							$\dashv$				
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	4,724.			
Effectively	b	Household employee wages not rep	•	,				1,721.			
Connected	c	Tip income not reported on line 1a (s		` ,							
With U.S.	d	Medicaid waiver payments not report		•			. 1d				
Trade or	е	Taxable dependent care benefits fro		` '	,		. 1e				
Business	•										
	g	Wages from Form 8919, line 6	. 1g								
Attach Form(s) W-2,	h	Other earned income (see instruction	. 1h								
1042-S,	i	Reserved for future use									
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>				
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		, ,,	tem L, <b>1k</b>						
attach	z	Add lines 1a through 1h					. 1z	4,724.			
Form(s) 1099-R if	2a	Tax-exempt interest 2a	ı	<b>b</b> Tax	able interest		. 2b				
tax was 3a Qualified dividends 3a				<b>b</b> Ord	linary dividends .		. 3b				
withheld.	4a	IRA distributions 4a			able amount						
If you did not	5a	Pensions and annuities 5a	. 5b								
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 8		4,724.							
	10	Adjustments to income from Schedincome	. 10								
	11	Subtract line 10 from line 9. This is y		4,724.							
	12	<b>Itemized deductions</b> (from Schedu deduction (see instructions)		13,850.							
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or	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	. 15	0.							

Form 1040-NR (2	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any fro	m Fo	rm(s): <b>1</b>	B14 <b>2</b>	497	2	3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form 1040	), line	3						17	0.
	18	Add lines 16 and 17								18	0.
	19	Child tax credit or credit for other dep	end	ents from Sched	ule 8812 (Fo	orm 104	40)			19	
	20	Amount from Schedule 3 (Form 1040	), line	e8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zero of	r les	s, enter -0						22	0.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line 1		vith a U.S. trade			23a				
	b	Other taxes, including self-employment line 21	ent ta	ax, from Schedul	e 2 (Form 1	040),	23b				
	С	Transportation tax (see instructions)					23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your to	tal ta	ıx						24	0.
Payments	25	Federal income tax withheld from:									
	а	Form(s) W-2					25a		169		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions)					25c				
	d	Add lines 25a through 25c					<u> </u>			25d	169.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and an	noun	t applied from 20	022 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from Scheo					28				
	29	Credit for amount paid with Form 104					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040					31				
	32	Add lines 28, 29, and 31. These are y	our <b>t</b>	otal other paym	ents and re	efunda	ble c	redits .		32	1
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33	169.
Refund	34	If line 33 is more than line 24, subtract								34	169.
11010110	35a	Amount of line 34 you want <b>refunded</b>					-	-		35a	169.
Direct deposit?	b	Routing number 0 4 4 0 0	-		<b>c</b> Type:		Chec	_	Savings		
See instructions.	d	Account number 7 6 6 5 0				I			<b>.</b>		
	е	If you want your refund check mailed			e the Unite	d State	es not	::: shown o	n page 1		
		enter it here.							. •		
	36	Amount of line 34 you want applied t					36	]			
Amount	37	Subtract line 33 from line 24. This is t									
You Owe		For details on how to pay, go to www	irs.g	gov/Payments or	see instruct	tions .				37	
	38	Estimated tax penalty (see instruction	ıs)				38				
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.									plete be	elow. 🗵 No
Party Designee	Designee's Phone Personal iden name no. number (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 an belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Sign	Your	signature		Date	Your occu	nation			l If t	he IRS s	sent you an Identity
Here	Tour	Signature		Date	IT EMP		D		Pr		PIN, enter it here
ļ	Phon	e no.		Email address					, ,		
Doid			parer	r's signature			Date	;	PTIN		Check if:
Paid				A SAI PAVAN K	JMAR DUDJE	PALLI			P024	70833	Self-employed
Preparer	Firm's name CLODAL TAVES LIC							578)965-9522			
Use Only	Firm's address 245 ROONEY CT F. BRIJNSWICK NJ 08816 Firm's E										

BAA

#### **SCHEDULE NEC** (Form 1040-NR)

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

Attachment

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

NIHARIKA SANTOSH GADHAVE 855-94-2585 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: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 Motion picture or TV copyright royalties . . . . . . . . . . . . . . . 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings \_\_\_\_\_ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) . . . . . . . . . . . . 13 14 14 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 Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). 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 (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 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 Form 4797, or both.

# SCHEDULE 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

vame	snown on Form 1040-NR				Your identifying						
NIH	ARIKA SANTOSH GADHAVE				855-94-2	585					
Α	Of what country or countries were yo										
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		☐ Yes	⊠ No							
D	Were you ever:										
1.	A U.S. citizen?										
2.	A green card holder (lawful permaner					Yes	⊠ No ⊠ No				
	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.										
_	Have you ever changed your visa typ					Yes	⊠ No				
F	If you answered "Yes," indicate the c	late and nature of the	change:			□ res	△ NO				
G	List all dates you entered and left the	-									
	Note: If you're a resident of Canada										
	check the box for Canada or Mexic	co and skip to item H		🗌 Canada	☐ Mexico						
	Date entered United States Date mm/dd/yy	departed United State mm/dd/yy	s	Date entered United State mm/dd/yy		nrted Unite nm/dd/yy	d States				
			<b>-</b>								
			<b>-</b>    -								
н	Give number of days (including vacation	on, nonworkdays, and	partial davs) vou v	were present in the United S	States durina:						
	2021, 2										
I	Did you file a U.S. income tax return	for any prior year?.				⊠ Yes	$\square$ No				
	If "Yes," give the latest year and form	n number you filed:		1040NR							
J	Are you filing a return for a trust? .					Yes	⊠ No				
	If "Yes," did the trust have a U.S. or										
	U.S. person, or receive a contribution					Yes	☐ No				
K	Did you receive total compensation of										
	If "Yes," did you use an alternative m					Yes	☐ No				
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.										
1.	Enter the name of the country, the ap	plicable tax treaty artic	cle, the number of	f months in prior years you	claimed the tre	aty benefi	t, and the				
	amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.										
	(a) Country		(b) Tax treaty arti	cle (c) Number of month	s (d) Am	ount of exe	empt				
				claimed in prior tax ye	ars income i	n current ta	ax year				
							_				
	(e) Total. Enter this amount on Form	n 1040-NR, line 1k. Do	not enter it anyv	where else on line 1							
2.	Were you subject to tax in a foreign country on any of the income shown in 1(d) above?										
3.	Are you claiming treaty benefits pursuant to a Competent Authority determination? $\square$ Yes										
	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
M	Check the applicable box if:										
1.	This is the first year you are making a			operty located in the Unite	ed States as ef	fectively c	onnected				
	with a U.S. trade or business under s						🗌				
2.	You have made an election in a pre										
	States as effectively connected with	a U.S. trade or busine	ess under section	8/1(d). See instructions.			<u> </u>				