Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

IRS e-file Signature Authorization

Submission Identification Number (SID)

Тахрау	yer's name	Social security number
SON	JAAKSHI KALRA	296-21-6115
Spouse	e's name	Spouse's social security number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are authorizing.)
Enter	whole dollars only on lines 1 through 5.	<u> </u>
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1	Adjusted gross income	 1 824.
2	Total tax	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3
4	Amount you want refunded to you	4
5	Amount you owe	
Par		
	r penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above	

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

authorize	GLOBAL	TAXES		to enter or generate my PIN	E
			ERO firm name		- 5

Ent	er fiv	/e di	gits,	but	as my
1	6	1	1	5	
	1 Ent	1 6 Enter fiv	1 6 1 Enter five di	1 6 1 1 Enter five digits,	1 6 1 1 5 Enter five digits, but don't enter all zeros

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 🕨

XI

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 signa	ature Da	ate 🕨	•						
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III C	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 6 nter a		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 Don't Submit This Form to the									
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)						

1040)-	Department of the Treasury-Inter U.S. Nonresident Al	nal Revent ien Inc	ue Service	n 20 23	OMB No.	1545-0074	IRS Use or sta	Only—Do not write ple in this space.
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year beginr	ning	, 2023	, ending		, 20		ee separate
Your first name	and	middle initial	Last na	me				dentifyi	ing number
							(see in	structio	ns)
SONAAKSHI			KALRA				296	-21-6	5115
Home address (number and street). If you have a P.O. box, see instructions.								Apt. no.	
485 MARIN BLVD									
		ffice. If you have a foreign address, al	so compl	ete spaces below.		State		ZIP co	
JERSEY CI		-	Faraian	province/state/county		NJ	- nantal a	0730)2
Foreign country	nai		Foreign	province/state/county		Foreigi	n postal c	Jue	
Filing Status		Single 🛛 Married filing sepa			ng surviving spous		🗌 E	state	🗌 Trust
Check only	lf	you checked the QSS box, enter the o	child's na	me if the qualifying per	son is a child but n	ot your de	pendent:		
one box.								-	
Digital Assets		ny time during 2023, did you: (a) rece							
	oth	erwise dispose of a digital asset (or a	financial i	nterest in a digital asse	t)? (See instruction				
Dependents				(0) Dependent's		(4) 🤇	heck the b		ifies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to	you C	nild tax cre	dit	Credit for other dependents
If more than four dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	•	,				3	3,324.
Effectively	b	Household employee wages not rep						-	
Connected	c	Tip income not reported on line 1a (-	
With U.S.	d	Medicaid waiver payments not repo				· · ·	· 10		
Trade or Business	e f	Taxable dependent care benefits fro Employer-provided adoption benefit					. 1		
Dusiness	g	Wages from Form 8919, line 6					. 19		
Attach	h	Other earned income (see instructio							
Form(s) W-2, 1042-S,	i	Reserved for future use							
SSA-1042-S,	j	Reserved for future use					. 1	i	
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	m Schedu	ule OI (Form 1040-NR),	item L,				
here. Also		line 1(e)			1k				
attach Form(s)	z	Add lines 1a through 1h	1	 . .				-	3,324.
1099-R if	2a	Tax-exempt interest.2aQualified dividends3a			xable interest			-	
tax was withheld.	3a 4a	IRA distributions			dinary dividends . xable amount .				
If you did not	-та 5а	Pensions and annuities			xable amount				
get a Form	6	Reserved for future use							
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu							
	8	Additional income from Schedule 1	(Form 104	40), line 10			. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively of	connected income		. 9		3,324.
	10	Adjustments to income from Sched	•	rm 1040), line 26. Thes 		-			2,500.
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income			. 1	1	824.
	12	Itemized deductions (from Schedu deduction (see instructions)						2	13,850.
	13a	Qualified business income deductio	n from Fo	orm 8995 or Form 8995	-A. 13a				
	b	Exemptions for estates and trusts o	5 (,					
	С	Add lines 13a and 13b							
	14 45								13,850.
	15 - ·	Subtract line 14 from line 11. If zero			ixable income		. 1	_	0.

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

Form **1040-NR** (2023)

Form 1040-NR (2023)							Page 2
Tax and	16	Tax (see instructions). Check if any from	n Form(s): 1 🗌 8	814 2 🗌 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 depe	endents from Schec	dule 8812 (Form 10	40)		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	0.
	23a	Tax on income not effectively connected	ed with a U.S. trade	or business from				
		Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employmer						
		line 21		()	23b			
	с	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your tota					24	0.
ayments	25	Federal income tax withheld from:						
aymento	а	Form(s) W-2			25a			
	b	Form(s) 1099			25b			
	c	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	
	e	Form(s) 8805					25e	
	f	Form(s) 8288-A					25e	
		Form(s) 1042-S					25g	
	g	2023 estimated tax payments and amo					25g 26	
	26						20	
	27	Reserved for future use			27		-	
	28	Additional child tax credit from Schedu	,	,	28		-	
	29	Credit for amount paid with Form 1040			29		_	
	30	Reserved for future use			30		-	
	31	Amount from Schedule 3 (Form 1040),			31			
	32	Add lines 28, 29, and 31. These are yo					32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 3	· · ·				33	
efund	34	If line 33 is more than line 24, subtract			•		34	
	35a	Amount of line 34 you want refunded					35a	
ect deposit? e instructions.	b	Routing number X X X X X X		c Type:		Savings		
	d	Account number X X X X X			·			
	е	If you want your refund check mailed	to an address outsid	de the United State	es not shown on	page 1,		
		enter it here.			1			
	36	Amount of line 34 you want applied to	your 2024 estimat	ted tax	36			
mount	37	Subtract line 33 from line 24. This is th	•					
ou Owe		For details on how to pay, go to www.	0 ,				37	0.
	38	Estimated tax penalty (see instructions	,		38			
hird	Do yo	u want to allow another person to discu	iss this return with t	he IRS? See instru	ctions. 🗌 Y	es. Com	olete be	low. 🛛 No
arty	Desig	nee's	Phone	e		nal identi	ification	
esignee	name					er (PIN)		
		penalties of perjury, I declare that I have exar they are true, correct, and complete. Declara:						
ign	,							, 0
-	Yours	signature	Date	Your occupation				ent you an Identity PIN, enter it here
ere				FINANCIAL	ANALYST		e inst.)	
	Phone	200	Email address		1 TO 1 TO 1			
		· · · · · ·	arer's signature		Date	PTIN		Check if:
aid	•		C C			P0208	2702	Self-employed
	SIAM	PRIYA RAM SAGAR GUPTA SYA	M PRIYA RAM	SAGAR GUPTA	04/11/2024			
reparer								
	Firm's	nameGLOBALTAXESLLCaddress245ROONEYCTE				Phone Firm's I		78)965-9522 4-3171965

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

SONA	AAKSHI KALRA	296-2	21-6115	
Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):		24	
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedu		5	
5 6	Farm income or (loss). Attach Schedule F.		6	
			7	
7		• • •	1	
8	Other income:			
a	Net operating loss	/	4	
b	Gambling		-	
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 . . 8d (2	
е	Income from Form 8853		4	
f	Income from Form 8889		4	
g	Alaska Permanent Fund dividends 8g		4	
h	Jury duty pay		4	
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property 81			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)			
n	Section 951(a) inclusion (see instructions)			
ο	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r			
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d			
t	Pension or annuity from a nongualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
z	Other income. List type and amount:			
	8z			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and			
	1040, 1040-SR, or 1040-NR, line 8		10	
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule 1 (Fo	orm 1040) 2023

	Adjustments to Income						
1	Educator expenses					1	
2	Certain business expenses of reservists, performing artists, and fee	-basis	s gov	ernme	ent		
	officials. Attach Form 2106	• •	• •	• •	· [1	12	
3	Health savings account deduction. Attach Form 8889					13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903					4	
5	Deductible part of self-employment tax. Attach Schedule SE					15	
6	Self-employed SEP, SIMPLE, and qualified plans				. [1	6	
7	Self-employed health insurance deduction				. 1	17	
8	Penalty on early withdrawal of savings				. 1	8	
9a	Alimony paid				. 1	9a	
b	Recipient's SSN						
С	Date of original divorce or separation agreement (see instructions):						
0	IRA deduction				. 2	20	
1	Student loan interest deduction					21	2,500.
2	Reserved for future use					22	
3	Archer MSA deduction					23	
4	Other adjustments:						
a		24a					
b	Deductible expenses related to income reported on line 81 from the						
		24b					
с	Nontaxable amount of the value of Olympic and Paralympic medals	2-10					
C	and USOC prize money reported on line 8m	24c					
d	Reforestation amortization and expenses	24d					
e	Repayment of supplemental unemployment benefits under the Trade	27u					
е	Act of 1974	24e					
f	Contributions to section 501(c)(18)(D) pension plans	24e			_		
-	Contributions by certain chaplains to section 403(b) plans	241 24g			_		
g	Attorney fees and court costs for actions involving certain unlawful	24 <u>y</u>					
n		24h					
	discrimination claims (see instructions)	24N					
I	Attorney fees and court costs you paid in connection with an award						
	from the IRS for information you provided that helped the IRS detect	.					
	tax law violations	24i					
J	Housing deduction from Form 2555	24j					
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
	1041)	24k					
z	Other adjustments. List type and amount:						
		24z					
5	Total other adjustments. Add lines 24a through 24z					25	
6	Add lines 11 through 23 and 25. These are your adjustments to income	e. Ente	er her	e and	on		
	Form 1040, 1040-SR, or 1040-NR, line 10					26	2,500.

SCHEDULE NEC
(Form 1040-NR)

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.

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

2 23 Attachment Sequence No. 7B

Your identifying number

296-21-6115

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

Nature of Income			(a) 10%	(b) 150/	(-) 000/	(d) Other (specify)			
	Nature of Income		(a) 10%	(b) 15%	(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) transactions	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	Capital gain from line 18 below	9							
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0								
а	Winnings								
b	Losses	10c							
11	Gambling—Residents of countries other than Canada. 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	Multiply line 13 by rate of tax at top of each column	14							
15	Tax on income not effectively connected with a U.S. trade or business. Add colum	nns (a)	through (d) of line 14	. Enter the total here	e and on Form 1040-	NR, line 23a 15			
	Capital Gains and Losses	From	Sales or Excha	nges of Proper	ty				
losses fi exchang	Inly the capital gains and rom property sales or ges that are from sources the United States and not 16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date accommodely accommod		(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).		
effective	sly connected with a U.S. s. Do not include a gain								
or loss o	on disposing of a U.S. real								
	y interest; report these								
(Form 1	040).								
	property sales or ges that are effectively								
connect	red with a U.S. business 17 Add columns (f) and (g) of line 16				17	()			
Form 4	Image: Source of the state o					r-0 18			
For Pa	perwork Reduction Act Notice, see the Instructions for Form 1040-NR.		-	3/07/24 PRO			(Form 1040-NR) 2023		

SCHEDULE OI (Form 1040-NR)

Other Information

OMB No. 1545-0074

Attach to Form 1040-NR.

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

2023
Attachment Sequence No. 7C

Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions.					Attachment Sequence No. 7C			
Name shown on Form 1040-NR					Your identify					
SONAAKSHI KALRA						296-21-	-6115			
Α	Of what country	or countries w	vere you a citizen or nation	al during the tax year?	INDIA					
В	In what country did you claim residence for tax purposes during the tax year? India									
С	•	pplied to be a	green card holder (lawful p	permanent resident) of	the United States? .		. Yes	🛛 No		
D	Were you ever:									
	A U.S. citizen?							🛛 No 🖾 No		
Ζ.	A green card holder (lawful permanent resident) of the United States?									
Е	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.									
F	Have you ever c	ave you ever changed your visa type (nonimmigrant status) or U.S. immigration status?								
G	List all dates you entered and left the United States during 2023. See instructions.									
	Note: If you're a									
	check the box f	for Canada or	Mexico and skip to item I	<u>H.</u>	🗌 Canada	Mexic	0			
	Date entered L		Date departed United Stat	tes Da	te entered United State	s Date de	eparted Unite	d States		
	mm/de	u/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy			
н	Give number of c	ays (including	vacation, nonworkdays, and	d partial days) you were	present in the United S	States during	g:			
	2021		, 2022	, and 202	2 3 365	··		_		
I	If "Yes," give the	Did you file a U.S. income tax return for any prior year?								
J	Are you filing a return for a trust?									
к	Did you receive	total compens	ation of \$250,000 or more	during the tax year? .			. 🗌 Yes	No		
	lf "Yes," did you	use an alterna	ative method to determine	the source of this com	pensation?		. 🗌 Yes	🗌 No		
L			ⁱ you are claiming exempt . See Pub. 901 for more in			tax treaty w	vith a foreign	country		
1.	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) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		Amount of exe ne in current ta			
	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1									
	Were you subject					🗌 No				
3.			s pursuant to a Competen Competent Authority deterr	-			. 🗌 Yes	🗙 No		
м	Check the applie	cable 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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions

BAA

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

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