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

IIICIIIai	The vertice Service					
Subm	nission Identification Number (SID)					
Taxpay	rer's name	Social security number				
MAN	OJ MACHA	053-67	-053	1		
Spouse	e's name	Spouse's so	cial secu	urity number		
Par	, ,	r year you a	are aut	thorizing.))	
	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 1	ı		
1	Adjusted gross income		1	10	<u>,650.</u>	
2	Total tax		2		0.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		315.	
4	Amount you want refunded to you		5		315.	
5 Pari	Amount you owe	keen a cor		our retu	rn\	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended					
to sen for any Agent payme author payme busine taxes persor	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmount of my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lot on to find the entry to the financial institution account in the part 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 terminate the transport of 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 particular transport of the payment (PIN) below is my signature for the income tax return (original or amended) I action to the Mithematical metal of the payment (PIN) below is my signature for the income tax return (original or amended) I action to the payment of the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I action to the payment (PIN) below is my signature for the income tax return (original or amended) I action to the payment (PIN) below is my signature for the income tax return (original or amended).	ection of the faction of the faction of the faction to debit the ethe authorizates must be processing coayment. I fur	ransmis and its of ax preperently the action. The ereceing the electrical the actions in the electrical the ele	ssion, (b) the designated paration softo this accordor revoke (converted no late ectronic parking who will be the converted no late ectronic parkinowledge	e reason Financial tware for unt. This cancel) a er than 2 yment of that the	
	onic Funds Withdrawal Consent. ayer's PIN: check one box only					
	I authorize GLOBAL TAXES LLC to enter or generate	my PIN 7	0 5	5 3 1	as my	
Ľ	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	. Er		digits, but er all zeros	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN methoelow.					
Your	signature ► Date ►					
0	PIN shadow have here					
Spou	se's PIN: check one box only	5111				
L	I authorize to enter or generate to enter or generate	-	40 4 60 40	digits, but	as my	
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
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 4 9 Don't en	6 0 ter all ze	8 2 7 eros	1	
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 Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this ret	urn in a	accordance		
ERO'	s signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				

E 1040-NR 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 Ja	n. 1–D	ec. 31, 2023, or other tax year beginni	ing		, 2023,	ending		, 20	instructions.		
Your first name and middle initial									Your identifying number (see instructions)		
MANOJ				MACHA					053-67-0531		
Home address (number and street). If you have a P.O. box,				structions.				•	Apt. no.		
10 CAMPBE											
City, town, or p	ost of	fice. If you have a foreign address, als	o comp	lete spaces belo	N.		State	2	ZIP code		
SOUTH PLA	AINF	IELD					NJ		07080		
Foreign country name Foreign province/state/county Foreign posta						postal cod	e				
Filing Status		Single Married filing sepa	• '	*		ng surviving spouse (Esta	ate 🗌 Trust		
Check only one box.	"										
Digital Assets	At a othe	ny time during 2023, did you: (a) receiverwise dispose of a digital asset (or a fi							xchange, or		
Dependents (see instructions)		(1) First name Last name		(2) Depender identifying nun		(3) Relationship to yo	Ch	neck the box	if qualifies for (see inst.): Credit for other dependents		
If more than four								_Ц			
dependents, see								Щ			
instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	,	,					10,650.		
Effectively	b	Household employee wages not repo									
Connected	С	Tip income not reported on line 1a (s		,				. 1c			
With U.S.	d	Medicaid waiver payments not repor		. ,		*		. 1d			
Trade or	е	Taxable dependent care benefits from		· ·				. 1e			
Business	f	Employer-provided adoption benefits	s from F	orm 8839, line 29				. 1f			
Attach	g Wages from Form 8919, line 6										
Form(s) W-2,	h	. 1h									
1042-S,	i	Reserved for future use									
SSA-1042-S, RRB-1042-S,	j	Reserved for future use	. <u>1j</u>								
and 8288-A	k	Total income exempt by a treaty from	n Sched	lule OI (Form 104)-NR),	item L,					
here. Also		line 1(e)				1k					
attach	Z	Add lines 1a through 1h						. 1z	10,650.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a			b Tax	kable interest		. 2b			
tax was	3a	Qualified dividends 3a				dinary dividends					
withheld.	4a						. 4b				
If you did not	5a	Pensions and annuities 5a			b Tax	kable amount	. 5b				
get a Form W-2, see	6	Reserved for future use	. 6								
instructions.	7	Capital gain or (loss). Attach Schedu	□ 7								
	8	Additional income from Schedule 1 (. 8								
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	. 9	10,650.							
	10	Adjustments to income from Schedu income									
	11	11 Subtract line 10 from line 9. This is your adjusted gross income									
	12	ard									
		eaty 12	13,850.								
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	С	Add lines 13a and 13b	• .	•		<u> </u>		. 13c			
	14								13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is	your t a	xable income		. 15	0.		

Form 1040-NR (2	2023)									Pa	age 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	14 2 🗌	4972	3 🗌		16		0.
Credits	17	Amount from Schedule 2 (Form 10							17		0.
	18	Add lines 16 and 17							18		0.
	19	Child tax credit or credit for other	depende	ents from Schedu	ule 8812 (Form	1040)			19		
	20	Amount from Schedule 3 (Form 10	040), line	8					20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18. If zer	ro or less	s, enter -0					22		0.
	23a	Tax on income not effectively conr	nected w	rith a U.S. trade o	or business fro	m					
		Schedule NEC (Form 1040-NR), lir	ne 15 .			23	а			ı	
	b	Other taxes, including self-employ	ment ta	x, from Schedule	e 2 (Form 1040	0),				ı	
		line 21				23	b			ı	
	С	Transportation tax (see instruction					С			ı	
	d	Add lines 23a through 23c							23d	ı	
	24	Add lines 22 and 23d. This is your							24		0.
Payments	25	Federal income tax withheld from:									
•	а	Form(s) W-2				25	а	315.		ı	
	b	Form(s) 1099				25	b			ı	
	С	Other forms (see instructions) .				25	С			ı	
	d	Add lines 25a through 25c							25d	31	15.
	е	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 20	22 return				26		
	27	Reserved for future use				- 1					
	28	Additional child tax credit from Sc					3			ı	
	29	Credit for amount paid with Form	1040-C			29	9			ı	
	30	Reserved for future use)			ı	
	31	Amount from Schedule 3 (Form 10					ı			ı	
	32	Add lines 28, 29, and 31. These ar	re your to	otal other paym	ents and refu	ndable	credits .		32	ı	
	33	Add lines 25d, 25e, 25f, 25g, 26, a	and 32. T	hese are your to	tal payments				33	3.1	15.
Refund	34	If line 33 is more than line 24, subt							34	3.1	 15.
	35a	Amount of line 34 you want refund				•	-		35a		 15.
Direct deposit?	b	Routing number 0 7 4 0				_		Savings			
See instructions.	d	Account number 7 6 3 8				T		J			
	е	If you want your refund check ma			e the United S	States n	ot shown or	n page 1,			
		enter it here.									
	36	Amount of line 34 you want applie				36			-		
Amount	37	Subtract line 33 from line 24. This	is the an	nount you owe.							
You Owe		For details on how to pay, go to w	ww.irs.g	ov/Payments or	see instruction	ns			37	I	
	38	Estimated tax penalty (see instruc-	tions) .			38	3				
Third	Do yo	ou want to allow another person to d	discuss th	his return with th	e IRS? See ins	structio	ns. 🗌 Y	es. Comp	lete be	low. 🛛 No	
Party	Desia	esignee's Phone Personal identif							ication		
Designee	name										
	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 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	ı	Date	Your occupat	tion		If th	e IRS s	ent you an Iden	ntitv
Here	· Jui	o.ga.a. o			. 541 5664pai					PIN, enter it he	•
					JUNIOR J	TAVA :	DEVELOP		inst.)		
	Phone	e no.		Email address				'			
Paid	Prepa	rer's name	Preparer'	s signature		Da	ite	PTIN		Check if:	
	SYAM	1 PRIYA RAM SAGAR GUPTA	SYAM E	PRIYA RAM S	SAGAR GUP	TA 03	/22/2024	P0208	2703	Self-emplo	oyed
Preparer	Firm's name CIODAI TAVES IIC Phone no								78) 965-95	22	
Use Only	Firm's address 2/15 DOONEY CT F DDINGWICK NT 09916 Firm's Ell									,	

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

053-67-0531 MANOJ MACHA 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 C 3 4 5 Real property income and natural resources royalties . . . 6 7 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 16 (a) Kind of property and description (f) LOSS (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 descriptive details not shown below) subtract (d) from (e). 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 17 Add columns (f) and (g) of line 16 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

	Shown on Form 1040-NH			Your identifying						
	OJ MACHA		0 737573	053-67-05						
A Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States										
В	Have you ever applied to be a green card holder (lawful	es during the tax year:	the United States							
С		permanent resident) of	t the United States? .		⊔ Yes	△ NO				
D	Were you ever: A U.S. citizen?					⊠ No				
_					Yes Yes ✓	⊠ No ⊠ No				
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 yearF1									
F	Have you ever changed your visa type (nonimmigrant sta	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?								
	If you answered "Yes," indicate the date and nature of the	e change:								
G	List all dates you entered and left the United States during 2023. See instructions.									
	Note: If you're a resident of Canada or Mexico AND co			_						
	check the box for Canada or Mexico and skip to item	H	\square Canada	☐ Mexico						
	Date entered United States Date departed United Sta	tes Da	ate entered United State			d States				
	mm/dd/yy mm/dd/yy		mm/dd/yy	n	nm/dd/yy					
				N						
Н	Give number of days (including vacation, nonworkdays, an 2021 . 2022									
ı	2021, 2022, Did you file a U.S. income tax return for any prior year? .	, and 20	365	·	Yes	⊠ No				
•	If "Yes" give the latest year and form number you filed:				□ res	∠ NO				
J	If "Yes," give the latest year and form number you filed: Are you filing a return for a trust?									
•	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a									
	U.S. person, or receive a contribution from a U.S. person?									
K	Did you receive total compensation of \$250,000 or more				☐ Yes	□ No ⊠ No				
	If "Yes," did you use an alternative method to determine				Yes	□No				
L	Income Exempt From Tax—If you are claiming exempt		•							
	complete (1) through (3) below. See Pub. 901 for more in			,	J	3.				
1	Enter the name of the country, the applicable tax treaty ar	ticle, the number of mo	onths in prior years you	claimed the tre	aty benefi	t, and the				
	amount of exempt income in the columns below. Attach F	orm 8833 if required. S	See instructions.							
	(a) Country	(b) Tax treaty article	(c) Number of month	is (d) Am	mount of exempt					
			claimed in prior tax ye	ars income in	current to	ax year				
						_				
	7.2		1							
_	(e) Total. Enter this amount on Form 1040-NR, line 1k. I	=				□No				
2										
3	3. Are you claiming treaty benefits pursuant to a Competent Authority determination?									
N.F	If "Yes," attach a copy of the Competent Authority deter	mination letter to your	return.							
М	Check the applicable box if: This is the first year you are making an election to treat in	noomo from roal area	arty located in the Linite	od States as aff	ootivol	onnocto-l				
1	This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See i		erty located in the Unite		ecuvely C					
2	You have made an election in a previous year that has				ated in th	ne United				
_	States as effectively connected with a U.S. trade or busi									