## 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

	10101100 0011100						
Subm	ssion Identification Numbe	r (SID)					
Taxpaye	er's name	Social secur	Social security number				
MAN	OJ MACHA	053-67	053-67-0531				
Spouse			Spouse's social security number				
Part	Tay Return Inform	nation — Tax Year Endi	ng December 31 202	 23 <b>(Enter year you a</b>	are au	thorizina )	
	whole dollars only on lines		ing December 01, 202	(Lintor year your	ii C aa		
	-	ne 4 only. Leave lines 1, 2, 3	and 5 blank				
1		-			1	10,	650.
2	-				2	,	0.
3	Federal income tax withhe	eld from Form(s) W-2 and Fo	rm(s) 1099		3		315.
4	Amount you want refunde	d to you			4		315.
5	Amount you owe				5		
Part	I Taxpayer Declara	tion and Signature Aut	horization (Be sure you g	get and keep a cop	y of y	our retur	n)
return to send for any Agent is payme authori payme busines taxes to person	original or amended) I am now I my return to the IRS and to a delay in processing the return or initiate an ACH electronic funt of my federal taxes owed or action is to remain in full forcent, I must contact the U.S. I se days prior to the payment (or receive confidential informatal identification number (PIN)	v authorizing. I consent to allow receive from the IRS (a) an ack or refund, and (c) the date of unds withdrawal (direct debit) en this return and/or a payment be and effect until I notify the I creasury Financial Agent at 1-(settlement) date. I also authoriation necessary to answer inquelled below is my signature for the interest of the settlement of the interest of the settlement of the settlement of the interest of the settlement of the	er declare that the amounts in I v my intermediate service provice nowledgement of receipt or rear any refund. If applicable, I author furty to the financial institution at of estimated tax, and the financial. S. Treasury Financial Agent to 888-353-4537. Payment cance the financial institutions involuiries and resolve issues related noome tax return (original or amount of the province of the service of the s	der, transmitter, or electrison for rejection of the torize the U.S. Treasury account indicated in the trial institution to debit the other transmitter that authorize the dependent of the processing of the payment. I fur	onic refransmistand its of ax preparation. The electric than electric the electric than electri	turn originatession, (b) the designated Foraration soft to this accours or revoke (coved no later ectronic payers.	or (ERO) e reason Financial ware for unt. This rancel) a r than 2 yment of that the
	nic Funds Withdrawal Consen  yer's PIN: check one box						
X	1	•	to enter or	generate my PIN $\frac{17}{2}$	0 ;	5 3 1	as my
		ERO firm name e tax return (original or amer		~ Er		digits, but er all zeros	asiny
	I will enter my PIN as m	y signature on the income t	ax return (original or amende s filed using the Practitioner				
Yours	ignature	Umenos		Date ▶			
Spous	se's PIN: check one box o	nlv					
	l authorize	<b>,</b>	to enter or	generate my PIN			as my
		ERO firm name		Er		digits, but	,
	signature on the income	tax return (original or amer	nded) I am now authorizing.	do	n't ente	er all zeros	
			ax return (original or amende s filed using the Practitioner				
Spous	e's signature ►			Date ►			
		Practitioner PIN Meth	nod Returns Only—continu	ie below			
Part	Certification and	Authentication — Pract	titioner 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 en	6 0	8 2 7	1
				Don ten	cor all Ze	03	
authori	zed to file for tax year indica	ted above for the taxpayer(s) i	ture for the electronic individual ndicated above. I confirm that ook for Authorized IRS e-file Pro	I am submitting this ret	urn in a	accordance	
ERO's	signature ►			Date ►			
	- J ·	ERO Must Retain	This Form – See Instruc				
	Do		the IRS Unless Reques				

# 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					053-0	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	/ nam	е	Foreig	n province/state/	county		Foreign	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		
<b>Dependents</b> (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	f Employer-provided adoption benefits from Form 8839, line 29									
Attach	<ul> <li>g Wages from Form 8919, line 6</li></ul>										
Form(s) W-2,											
1042-S,	i	Reserved for future use									
SSA-1042-S, RRB-1042-S,	j	. <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>b</b> Tax	kable interest		. 2b			
tax was	3a										
withheld.	4a						. 4b				
If you did not	5a	Pensions and annuities 5a			<b>b</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	□ <b>7</b>								
	8	Additional income from Schedule 1 (Form 1040), line 10									
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income							10,650.		
	10	to . 10									
	11	Subtract line 10 from line 9. This is ye	our <b>adj</b> u	usted gross inco	me			. 11	10,650.		
	12	Itemized deductions (from Schedu	le A (Fo	rm 1040-NR)) or,	for ce	rtain residents of Indi	a, stand	ard			
	deduction (see instructions)								13,850.		
	13a										
	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 <b>t</b> 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): <b>1</b> 88	14 <b>2</b> 🗌	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 <b>to</b>	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 <b>to</b>	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. 🗌 <b>Y</b>	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 knowle 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 n							78) 965-95	22		
Use Only	Firm's address 2/15 DOONEY OF E DDIINGWICK 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? <a href="INDIA">INDIA</a> In what country did you claim residence for tax purposes during the tax year? <a href="United States">United States</a>											
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	☐ Yes	⊠ No								
	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	ou 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										
	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	Did you file a LLS, income tay return for any prior year?	, 2022, and 2023  ne tax return for any prior year?									
•	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	(d) Amount of exemp						
			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		Were you subject to tax in a foreign country on any of the income shown in 1(d) above?									
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 rool pro-	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										