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)

Taxpaye	er's name	Social security number
SHW	ETA SANJAY CHURI	744-58-3226
Spouse	's name	Spouse's social security number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you are authorizing.)
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 25,875.
2	Total tax	2 1,223.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 2,135.
4	Amount you want refunded to you	4 912.
5	Amount you owe	5

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

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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN

Ent dor	as my				
8	3	2	2	6	

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

Spouse's	PIN: chec	k one box	only

I authorize

to enter or generate my PIN

Date

					as				
t	ter five digits, but								
n	't er	iter a	all ze	ros					

En do 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.

Spouse's signature	Date 🕨
	Practitioner PIN Method Returns Only—continue below
Part III Certifi	ation and Authentication – Practitioner PIN Method Only
ERO's EFIN/PIN. En	ter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros

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 Form — Se Don't Submit This Form to the IRS Unless		
For Donorwork Doduction Act N			Earm 8879 (Payr 01 2021)

1040)	NR Department of the Treasury-Inter U.S. Nonresident AI	rnal Reven	ue Service come Tax Return	2023	OMB N	o. 154	5-0074	or stap	Only—Do not write le in this space.
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year beginr	ning	, 2023, e	ending		, 2	20		e separate structions.
Your first name	and	middle initial	Last na	ime					lentifyir	ng number
								(see ins	structior	ıs)
SHWETA SA	NJ	AY	CHUR	I				744-	-58-3	226
Home address ((nun	ber and street). If you have a P.O. box	x, see ins	tructions.						Apt. no.
28 TERRAC										2
		office. If you have a foreign address, al	lso comp	lete spaces below.		Stat	е		ZIP co	
JERSEY CI						NJ			0730	7
Foreign country	nar	16	Foreigr	n province/state/county		Fore	ign p	ostal co	de	
Filing Status		Single Married filing sep	arately (N	IFS) 🛛 🗌 Qualifyin	g surviving spous	e (QSS)		🗌 Es	state	Trust
	ŀ	you checked the QSS box, enter the	child's na	ame if the qualifying perso	on is a child but n	ot your	depe	ndent:		
Check only one box.	-									
Digital Assets	At	any time during 2023, did you: (a) rece	ive (as a	reward award or payme	ent for property or	service	s): or	(h) sell	exchan	ae or
Digital Associs		erwise dispose of a digital asset (or a								
Dependents						(4	4) Che	ck the bo	x if qualif	ies for (see inst.):
(see instructions):		(1) First name		(2) Dependent's identifying number	(2) Deletienship te		Child	I tax cred	11T I -	redit for other
		(1) First name Last name			(3) Relationship to	you				dependents
If more than four										
dependents, see instructions and										
check here										<u> </u>
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see i	nstructions)				1a		25,875.
Effectively	b	Household employee wages not rep	`	,					-	·
Connected	с	Tip income not reported on line 1a (;	
With U.S.	d	Medicaid waiver payments not repo	orted on F	Form(s) W-2 (see instructi	ions)			1d	I	
Trade or	е	Taxable dependent care benefits from	om Form	2441, line 26				1e	,	
Business	f	Employer-provided adoption benefi	its from F	orm 8839, line 29				1f		
Attach	g	Wages from Form 8919, line 6						1g	I	
Form(s) W-2,	h	Other earned income (see instructio						1h	1	
1042-S,	i	Reserved for future use						_		
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1	• •	• •	1j		
and 8288-A	k	Total income exempt by a treaty fro								
here. Also attach	-	line 1(e)								25 875
Form(s)	z 2a	Add lines 1a through 1h		1	able interest .					25,875.
1099-R if tax was	3a	Qualified dividends 3			nary dividends					
withheld.	4a	IRA distributions 4			able amount .					
lf you did not	5a	Pensions and annuities 5	a		able amount .				,	
get a Form	6	Reserved for future use		· · · · · · · · ·				6		
W-2, see instructions.	7	Capital gain or (loss). Attach Sched	ule D (Fo	rm 1040) if required. If no	ot 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. This is	your total effectively co	onnected income			9	_	25,875.
	10	Adjustments to income from Scheolincome		orm 1040), line 26. These	•	-				
	11	Subtract line 10 from line 9. This is								25,875.
	12	Itemized deductions (from Schedu deduction (see instructions)							<u>.</u>	13,850.
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts o	only (see i	nstructions)	13b					
	С	Add lines 13a and 13b						130	>	
	14									13,850.
	15	Subtract line 14 from line 11. If zero			able income .			15		12,025.

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

Form **1040-NR** (2023)

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if an	y from For	rm(s): 1 🗌 88	314 2 🗌 497	2 3 🗌		16	1,223.
Credits	17	Amount from Schedule 2 (Form						. 17	0.
	18	Add lines 16 and 17						. 18	1,223.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 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 z	ero or less	s, enter -0				. 22	1,223.
	23a	Tax on income not effectively co	nnected w	vith a U.S. trade	or business from				
		Schedule NEC (Form 1040-NR),	line 15 .			23a			
	b	Other taxes, including self-emplo	oyment ta	x, from Schedul	e 2 (Form 1040),				
		line 21				23b			
	с	Transportation tax (see instruction	ons)			23c			
	d	Add lines 23a through 23c						. 23d	
	24	Add lines 22 and 23d. This is you	ur total ta	x				. 24	1,223.
Payments	25	Federal income tax withheld from	n:						
-	а	Form(s) W-2				25a	2,13	5.	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						. 25 d	2,135.
	е	Form(s) 8805						. 25 e	
	f	Form(s) 8288-A						. 25f	
	g	Form(s) 1042-S						. 25g	
	26	2023 estimated tax payments an	id amount	applied from 20)22 return			. 26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S	chedule 8	812 (Form 1040)	28			
	29	Credit for amount paid with Form	n 1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form	1040), line	15		31			
	32	Add lines 28, 29, and 31. These	are your t e	otal other paym	ents and refunda	ble credits .		. 32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your to	otal payments .			. 33	2,135.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the amoun	nt you overpaid		. 34	912.
	35a	Amount of line 34 you want refu					[35a	912.
Direct deposit?	b	Routing number 0 2 1 2			c Type: 🛛	Checking	Saving	gs	
See instructions.	d	Account number 8 8 8 7							
	е	If you want your refund check m	ailed to a	n address outsic	le the United State	es not shown on	n page	1,	
		enter it here.				·			
	36	Amount of line 34 you want app				36			
Amount	37	Subtract line 33 from line 24. Thi		-					
You Owe		For details on how to pay, go to	-	•				. 37	
T	38	Estimated tax penalty (see instru	,			38			
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions. 🗌 Ye	es. Co	mplete be	low. 🛛 No
Party	Desig	nee's		Phone				ntification	
Designee	name					numbe		,	
		penalties of perjury, I declare that I hav they are true, correct, and complete. D							
Sign									, ,
-	Yours	signature		Date	Your occupation				ent you an Identity PIN, enter it here
					STUDENT			see inst.)	
liele				Email address				,	
	Phone	e no.		Ellian address					
	Phone Prepa	e no. rer's name	Preparer	's signature		Date	PTIN		Check if:
Paid	Prepa	rer's name	•	's signature	R GUPTA ТАТ.Т.АМ				
Paid Preparer -	Prepa SYAM	rer's name PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	's signature	R GUPTA TALLAM	Date 03/07/2024	P02	082703	Self-employed
Here Paid Preparer Use Only	Prepa SYAM Firm's	rer's name	SYAM PR LLC	's signature IYA RAM SAGAH			P02 Phor	082703 neno. (6	

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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.

Name shown on Form 1040-NR

2 23 Attachment Sequence No. 7B

SHWETA	SANJAY	CHURI

Your identifying number 744-58-3226

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

Nature of Income			(a) 10%	(b) 15%	(a) 2004	(d) Other (specify)		ecify)		
		Nature of Income			(a) 10%	(d) 15%	(c) 30%		%	%
1	Dividends and divide	nd equivalents:								
а	Dividends paid by U.	S. corporations		1a						
b	Dividends paid by fo	reign corporations		1b						
с	Dividend equivalent p	ayments received with respect to section 871(m) tra	ansactions	1c						
2	Interest:									
а	Mortgage			2a						
b		prations		2b						
с				2c						
3		atents, trademarks, etc.)		3						
4		copyright royalties		4						
5		rights, recording, publishing, etc.)		5						
6		e and natural resources royalties		6						
7	Pensions and annuiti	es		7						
8		ïits		8						
9	-	e 18 below		9						
10	Gambling – Residents of Canada only. Enter net income in column (c).									
а	Winnings									
b				10c						
11	Note: Enter winnings	s of countries other than Canada.		11						
12	Other (specify):									
				12						
13	Add lines 1a through	12 in columns (a) through (d)		13						
14		ate of tax at top of each column		14						
15	Tax on income not e	ffectively connected with a U.S. trade or business						-NR, line 23a 1	5	
		Capital Gains and	Losses F	rom	Sales or Excha	inges of Proper	ty			
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyy		(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	i), If (d). sut	(g) GAIN d) is more than (e), btract (e) from (d).
	vely 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).										
	property sales or								+	
	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16			1	<u> </u>	17	(
on Sche	edule D (Form 1040), 1797, or both.	18 Capital gain. Combine columns (f) and (g)	a) of line 17	Fnte	r the net gain her	e and on line 9 abo	ve If a loss ente	1	2	
		ct Notice, see the Instructions for Form 1040-NB.			-	2/22/24 PRO			-	rm 1040-NB) 2023
יטורפ								Scheutile N		ATTE TO 40-INDL 2023

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

2023

OMB No. 1545-0074

	nent of the Treasury Go	to www.irs.gov/Form1040 An	NR for instructions and swer all questions.	the latest information.		Attachment Sequence N	lo. 7C
Name sl	hown on Form 1040-NR				Your identify		
SHWE	ETA SANJAY CHURI				744-58-		
Α	Of what country or countries	were you a citizen or natio	nal during the tax year?	INDIA			
В	In what country did you claim	residence for tax purpos	es during the tax year?	United States			
C	Have you ever applied to be a	ı green card holder (lawful	permanent resident) of	the United States? .			🛛 No
D	Were you ever:						
	A U.S. citizen?	· · · · · · · · ·					🔀 No 🔀 No
Ζ.	If you answer "Yes" to (1) or (2	,					
Е	If you had a visa on the last				ter vour U.S	j.	
	immigration status on the last			,,,,	•		
F	Have you ever changed your v If you answered "Yes," indica		atus) or U.S. immigratio	on status?		. 🗌 Yes	🗙 No
G	List all dates you entered and			ns.			
	Note: If you're a resident of (•		ent intervals	3,	
	check the box for Canada o	r Mexico and skip to item	<u>H.</u> <u>.</u>	🗌 Canada	Mexico)	
	Date entered United States	Date departed United Sta	ates Da	te entered United State	s Date de	eparted Unite	d States
	mm/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
					<u> </u>		
н	Give number of days (including	vacation, nonworkdays, a	nd partial days) you were	present in the United S	 States durinc		
		, 2022		•	-		
I	Did you file a U.S. income tax If "Yes," give the latest year a	return for any prior year?					🗌 No
J	Are you filing a return for a tru If "Yes," did the trust have a U.S. person, or receive a cont	st?		es, make a distributior	n or loan to a	. Yes a	🛛 No
κ	Did you receive total compens	sation of \$250,000 or more	e during the tax year? .			. 🗌 Yes	🛛 No
	If "Yes," did you use an altern						🗌 No
L	Income Exempt From Tax-I complete (1) through (3) below				tax treaty w	ith a foreigr	ı country,
1	Enter the name of the country,				claimed the	treaty benef	it and the
	amount of exempt income in the					liouty bonon	it, and the
	(a) Cou	untry	(b) Tax treaty article	(c) Number of month	ıs (d) /	Amount of ex	empt
				claimed in prior tax ye	ars incom	e in current t	ax year
	(e) Total. Enter this amount of	on Form 1040-NR, line 1k.	Do not enter it anywher	re else on line 1			
	Were you subject to tax in a fe						🗌 No
3.	Are you claiming treaty benefi		•			. 🗌 Yes	🗙 No
	If "Yes," attach a copy of the	Competent Authority dete	rmination letter to your	return.			
M	Check the applicable box if:	aking on alastion to treat	income from real property	the located in the Linite	nd Statas as	offootivolus	opported

This is the first year you are making an election to treat income from real property located in the United States as effectively connected 1.

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 02/22/24 PRO Schedule OI (Form 1040-NR) 2023