(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

internal rievende cervice								
Submission Identificati	ion Number (SID)							
Taxpayer's name	,		Social securit	y numbe	er			
SWAGATH BANDA			443-45-9176					
Spouse's name	Spouse's soc							
Part I Tax Retu	ırn Information — Tax Year Ending Dece	ember 31, 2023 (Enter	vear vou a	re aut	horizina.	)		
	ly on lines 1 through 5.	2020 (=:::::	<i>,</i>			<i>'</i>		
	ilers use line 4 only. Leave lines 1, 2, 3, and 5 b	lank.						
1 Adjusted gross	income			1	1	,683.		
2 Total tax				2		0.		
3 Federal income	tax withheld from Form(s) W-2 and Form(s) 109	9		3				
•	,			4				
5 Amount you ow	ve	<u> </u>		5		0.		
	r Declaration and Signature Authorization, I declare that I have examined a copy of the income							
return (original or amende to send my return to the for any delay in processir Agent to initiate an ACH or payment of my federal ta authorization is to remain payment, I must contact business days prior to the taxes to receive confide	f, it is true, correct, and complete. I further declare ed) I am now authorizing. I consent to allow my interr IRS and to receive from the IRS (a) an acknowledgering the return or refund, and (c) the date of any refund electronic funds withdrawal (direct debit) entry to the xes owed on this return and/or a payment of estimate in in full force and effect until I notify the U.S. Treas the U.S. Treasury Financial Agent at 1-888-353-4 e payment (settlement) date. I also authorize the finantial information necessary to answer inquiries and small Consent.	nediate service provider, transmi ment of receipt or reason for reje d. If applicable, I authorize the U. financial institution account indi ed tax, and the financial institutio ury Financial Agent to terminate 537. Payment cancellation requ incial institutions involved in the resolve issues related to the p	tter, or electroction of the tr S. Treasury a cated in the tr n to debit the the authoriza ests must be processing of ayment. I furl	enic retuents ansmissed its distance of the entry to ation. To be received the elements and the elements are the elements and the elements and the elements are the elements and the elements are the elements and the elements are	urn origination, (b) the esignated aration sofo this according revoke (ed no late extronic paramourledge	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
Taxpayer's PIN: chec								
• •	GLOBAL TAXES LLC	to enter or generate i	mv PIN 5	9 1	7 6	as my		
	ERO firm name the income tax return (original or amended) I am		En		ligits, but all zeros	ao my		
	y PIN as my signature on the income tax return return your own PIN <b>and</b> your return is filed using the state of the state							
Your signature ►		Date ▶						
Spouse's PIN: check	one box only							
authorize	one box only	to enter or generate	my PIN			as my		
	ERO firm name		,	er five o	ligits, but	ao my		
signature on t	the income tax return (original or amended) I am	n now authorizing.	do	n't enter	all zeros			
	y PIN as my signature on the income tax return ering your own PIN <b>and</b> your return is filed using the second seco							
Spouse's signature ▶		Date ►						
	Practitioner PIN Method Retu	rns Only—continue below						
Part III Certifica	tion and Authentication — Practitioner F	PIN Method Only						
ERO's EFIN/PIN. Ente	er your six-digit EFIN followed by your five-digit	self-selected PIN. 2 2	2 4 9 Don't ent	6 6 er all zer	1 9 8	9		
authorized to file for tax	umeric entry is my PIN, which is my signature for th year indicated above for the taxpayer(s) indicated a titioner PIN method and <b>Pub. 1345,</b> Handbook for Au	above. I confirm that I am subm	itting this retu	ırn in ad	ccordance			
ERO's signature ▶		Date ►						
	ERO Must Retain This For		- O					
	Don't Submit This Form to the IRS	o Unless Requested To D	0 50					

# E1040-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 Jan	. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, ;	20	See separate instructions.		
Your first name and middle initial			Last name				Your identifying number (see instructions)			
SWAGATH			BAND	7)			`	443-45-9176		
Home address (number and street). If you have a P.O. box,							443-	Apt. no.		
1626 WISH		· · ·	, 300 1113	didelloris.				3		
			so comp	lete snaces helow		State		ZIP code		
							63017			
CHESTERFI Foreign country			Foreign	n province/state/county		MO Foreign p				
r oreign country	Παιτι	C	l orcigi	r province/state/county		r oreign p	ostai cod	C		
Filing Status	X	Esta	ate Trust							
Check only one box.	If ;	you checked the QSS box, enter the c	child's na	ame if the qualifying pers	son is a child but not	your depe	ndent:			
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f						xchange, or		
<b>Dependents</b> (see instructions):		(1) First name Last name	ne Last name		(3) Relationship to yo	Chile	ck the box d tax credit	if qualifies for (see inst.):  Credit for other dependents		
If we are the section										
If more than four dependents, see										
instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	1,683.		
Effectively	b	Household employee wages not rep	orted or	Form(s) W-2			. 1b			
Connected	С	Tip income not reported on line 1a (s	see instr	uctions)			. 1c			
With U.S.	d	Medicaid waiver payments not report	rted on F	Form(s) W-2 (see instruc	tions)		. 1d			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e			
Business	f	Employer-provided adoption benefit	s from F	form 8839, line 29 .			. 1f			
	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)								
attach	z	Add lines 1a through 1h					. 1z	1,683.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a	1	<b>b</b> Tax	cable interest		. 2b			
tax was	За	Qualified dividends 3a	1	<b>b</b> Ord	dinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a	1	<b>b</b> Tax	cable amount		. 4b			
If you did not	5a	Pensions and annuities 5a	1	<b>b</b> Tax	cable amount		. 5b			
get a Form	6	Reserved for future use					. 6			
W-2, see 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	1,683.						
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your <b>total adjustments to income</b>									
	11	Subtract line 10 from line 9. This is y	. 11	1,683.						
	12	Itemized deductions (from Schedu deduction (see instructions)		13,850.						
	13a	Qualified business income deduction						,		
	b	Exemptions for estates and trusts or								
	c	Add lines 13a and 13b					13c			
	14							13,850.		
	15	Subtract line 14 from line 11. If zero						0.		

Form 1040-NR (	2023)										Page
Tax and	16	Tax (see instructions). Check if any fro	m Fo	rm(s): <b>1</b> 8	314 <b>2</b> [	4972	2 ;	3 🗆 <u> </u>		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 de	pende	ents from Sched	ule 8812 (Fo	orm 104	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	s, enter -0						22	0.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line		vith a U.S. trade			23a				
	b	Other taxes, including self-employm line 21	ent ta	x, 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								24	0.
Payments	25	Federal income tax withheld from:									
. ayoo	а	Form(s) W-2					25a				
	b	Form(s) 1099					25b				
	С	Other forms (see instructions)					25c				
	d	Add lines 25a through 25c								25d	
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and ar								26	
	27	Reserved for future use					27				
	28	Additional child tax credit from Sche					28			-	
	29	Credit for amount paid with Form 10					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040					31			-	
	32	Add lines 28, 29, and 31. These are	,.					edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33	
Defined	34	If line 33 is more than line 24, subtra								34	
Refund	35a	Amount of line 34 you want <b>refunde</b>					-	=		35a	
Direct deposit?		Routing number   X   X   X   X			c Type:	_		_	Savings	SSA	
Direct deposit? See instructions.	b d	Account number X X X X X X							Saviriys		
	е	If you want your refund check mailed enter it here.	ı to ai	n address outsit	ie the Onite	u Siaie	s not	Shown on	page 1,		
	36	Amount of line 34 you want <b>applied</b>					36				
A	37	Subtract line 33 from line 24. This is				•	30				
Amount	31	For details on how to pay, go to www		•		tione				37	
You Owe	20		_	•						31	0.
Theirest	38 Estimated tax penalty (see instructions)						loto bo	low. 🗵 No			
Third Party	Do you want to allow another person to discuss this return with the IRS? See instructions.    Yes. Comp										
Party Designee	Designee's Phone Personal ident name no. Personal ident name no.					fication					
Designee	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowled belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled										
Sign					Your occu		, a o a				ent you an Identity
Here	Your	signature		Date	STUDEN	•			Pro		PIN, enter it here
t	Phon	e no.		Email address					1 (		
D-:-I			parer	's signature			Date		PTIN		Check if:
Paid				_	ידחוזת אאשו	Τ.Τ.ΤΔΟ			P0247	0833	Self-employed
Preparer								78)965-9522			
Use Only		Firm's name GLOBAL TAXES LLC Phone n  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's El							78/905-95 <u>22</u> 88-2145487		

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

SWAGATH BANDA 443-45-9176 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.

Your identifying number

Attachment Sequence No. **7C** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

SWZ	GATH BANDA			443-45-917	76						
Α	Of what country or countries were you a citizen or national during the tax year? _INDIA										
В	In what country did you claim residence for tax purposes	s during the tax yea	ar? United States								
С	Have you ever applied to be a green card holder (lawful p	ermanent resident)	of the United States? .	[	Yes	⊠ No					
D	Were you ever:	,									
1	. A U.S. citizen?			[	Yes	⊠ No					
2	. A green card holder (lawful permanent resident) of the Un			⊠ 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.										
_					¬ v	<b>⊠</b> N -					
F	Have 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	g 2023. See instruc	tions.								
	Note: If you're a resident of Canada or Mexico AND cor			ent intervals,							
	check the box for Canada or Mexico and skip to item h	<u>1.</u> <u>.</u>	$\square$ Canada	Mexico							
	Date entered United States mm/dd/yy  Date departed United State mm/dd/yy	es	Date entered United State mm/dd/yy		ed United n/dd/yy	States					
Н	Give number of days (including vacation, nonworkdays, and 2021, 2022										
I	Did you file a U.S. income tax return for any prior year? . If "Yes," give the latest year and form number you filed:				⊠ Yes	☐ No					
J	Are you filing a return for a trust?	r the grantor trust r	ules, make a distributior	[ or loan to a	☐ Yes	⊠ No					
	U.S. person, or receive a contribution from a U.S. person				_ Yes	☐ No					
K	Did you receive total compensation of \$250,000 or more				Yes	⊠ No					
	If "Yes," did you use an alternative method to determine t				_ 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 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) Country	(b) Tax treaty article	le (c) Number of month claimed in prior tax ye	, ,							
	/\										
_	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	-		F	٦,,						
		ere you subject to tax in a foreign country on any of the income shown in 1(d) above?									
3		e you claiming treaty benefits pursuant to a Competent Authority determination?									
	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
М	Check the applicable box if:										
1	<ul> <li>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 in</li> </ul>	·			-	nnected .					
2	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busing										

REV 03/07/24 PRO