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

Submission Identification Number (SID)							
Taxpayer's name	Social security number						
MANEESHA GORANTLA	802-53-8446						
Spouse's name	Spouse's social security number						
Part I Tax Return Information — Tax Year Ending December 31, 2023	(Enter 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							
2 Total tax							
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	0 20 7						
4 Amount you want refunded to you							
5 Amount you owe							
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or am							
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accompayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellating business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amendate the context of the payment of the payment of the income tax return (original or amendate the payment of the payment of the payment of the income tax return (original or amendate the payment of the payment of the payment of the income tax return (original or amendate the payment of the paymen	for rejection of the transmission, (b) the reason e the U.S. Treasury and its designated Financial unt indicated in the tax preparation software for netitution to debit the entry to this account. This erminate the authorization. To revoke (cancel) a on requests must be received no later than 2 d in the processing of the electronic payment of the payment. I further acknowledge that the						
Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only							
▼ I authorize GLOBAL TAXES LLC to enter or ger	nerate my PIN 3 8 4 4 6 as my						
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros						
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.							
Your signature ► Dat	te >						
Spouse's PIN: check one box only							
I authorize to enter or ger	nerate my PIN as my						
ERO firm name	Enter five digits, but						
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros						
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.							
Spouse's signature ▶ Dat	te ▶						
Practitioner PIN Method Returns Only—continue	below						
Part III 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 2 2 4 9 6 0 8 2 7 1						
Ento o Enternation your old digit Enternation own by your involving took collected invited	Don't enter all zeros						
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provide	n submitting this return in accordance with the						
ERO's signature ▶ Dat	te ▶						
ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Requested							

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 Jar	n. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, 2	0	See separate instructions.
Your first name and middle initial						Your identifying number		
							(see instructions)	
MANEESHA			GORA	NTLA			802-5	3-8446
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.		•		Apt. no.
7914 PEPE	PER	PIKE						
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
WEST CHES	STER					OH	4	5069
Foreign country name Foreign province/state/county Foreign posta								
-	T							
Filing	×	☐ Estate	e 🔲 Trust					
Status								
Check only		you checked the QSS box, enter the o			,			
one box.								
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a t				•	(b) sell, exc	
Dependents						(4) Chec	k the box if	qualifies for (see inst.):
(see instructions)	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to you	Child	tax credit	Credit for other dependents
		(i) i i ot hamo		,g	(e) Holdstorion p to you	•	П	С
If more than four							П	
dependents, see instructions and							<u> </u>	
check here							$\overline{\sqcap}$	
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)			1a	14,880.
Effectively	b	Household employee wages not rep	•	•			1b	·
Connected	С	Tip income not reported on line 1a (see instr	uctions)			1c	
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruct	tions)		1d	
Trade or	е	1e						
Business	f	Employer-provided adoption benefit	ts from F	orm 8839, line 29 .			1f	
g Wages from Form 8919, line 6								
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .		<u></u>		1h	
1042-S,	i	Reserved for future use			1i			
SSA-1042-S, RRB-1042-S,	j	Reserved for future use					1j	
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		,	tem L,			
attach	z	Add lines 1a through 1h					1z	14,880.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	_	b Tax	cable interest		2b	
tax was	3a	Qualified dividends 3a	3	b Ord	dinary dividends		3b	
withheld.	4a	IRA distributions 4a			cable amount		4b	
If you did not get a Form	5a	Pensions and annuities 5a			cable amount		5b	
W-2, see	6	Reserved for future use					6 7	
instructions.	7		lule D (Form 1040) if required. If not required, check here					
	8	Additional income from Schedule 1					8	14 000
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and					9	14,880.
	10	Adjustments to income from Sched income					10	
	11	Subtract line 10 from line 9. This is y	our adju	ısted gross income			11	14,880.
	12	Itemized deductions (from Schedudeduction (see instructions)						13,850.
	13a	Qualified business income deductio						
	b	Exemptions for estates and trusts of	nly (see i	nstructions)	13b			
	С	Add lines 13a and 13b					13c	
	14	Add lines 12 and 13c					14	13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	1,030.

Form 1040-NR (2	2023)										Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from Foi	rm(s): 1 88	314 2 [4972	2 3 [16	104.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	104.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Fo	orm 104	40)			19	
	20	Amount from Schedule 3 (Form	20								
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0						22	104.
	23a	Tax on income not effectively co					020				
	b	Schedule NEC (Form 1040-NR), Other taxes, including self-empl				1	23a				
		line 21	,	•	•	′′	23b				
	С	Transportation tax (see instruction				- 1	23c				
	d	Add lines 23a through 23c	,							23d	
	24	Add lines 22 and 23d. This is you								24	104.
Payments	25	Federal income tax withheld from									101.
1 dyllicits	а	Form(s) W-2				_	25a		848.		
	b	Form(s) 1099				t	25b		0101	\dashv	
	c	Other forms (see instructions) .				- 1	25c			1	
	d	Add lines 25a through 25c								25d	848.
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments ar								26	
	27	Reserved for future use					27				
	28	Additional child tax credit from S				ī	28				
	29	Credit for amount paid with Forn		•	•	t	29				
	30	Reserved for future use				t t	30			1	
	31	Amount from Schedule 3 (Form				1	31			-	
	32	Add lines 28, 29, and 31. These	32								
	33		33	848.							
Refund	 Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 									34	744.
neiuna		35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here									744.
Direct deposit?	b	Routing number 0 4 4 0 0 0 3 7 c Type: Solvings									, 11.
See instructions.	d	Account number 7 6 7 7 9 7 2 1 7									
	e										
	·										
	36	enter it here. Amount of line 34 you want app	lied to voi	ur 2024 estimat	ed tax	T	36				
Amount	37	Subtract line 33 from line 24. Th									
You Owe	•	For details on how to pay, go to		-		tions .				37	
roa o we	38	Estimated tax penalty (see instru	_	-		. 1	38				
Third										ow. 🗵 No	
Party	Designee's Phone Personal identifi										
Designee	name no. number (PIN)								iloution		
	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										, ,	
Here	Your signature Date Your occ				Tour occu	арацоп	ion If the IRS sent you an Identity Protection PIN, enter it here				
	STUDENT (see							inst.)			
	Phone			Email address							
Paid	Prepa	rer's name	Preparer	's signature			Date		PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA	SYAM 1	PRIYA RAM	SAGAR GI	UPTA	03/30/	2024	P0208	2703	Self-employed
Use Only	Firm's name CIODAI TAVECIIC Phone no								ю. (б	78)965-9522	
OSE OILLY	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN									IN	

BAA

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number MANEESHA GORANTLA 802-53-8446 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(-) 100/	(h) 450/	4-1.000/	(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 colun					-NR, line 23a 15		
	Capital Gains and Losses	From	Sales or Excha	nges of Proper	ty			
losses f	nly the capital gains and from property sales or ges that are from sources he United States and not		(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).	
	ely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
gains a	y interest; report these nd losses on Schedule D							
(Form 1								
exchan	property sales or ges that are effectively							
	797, or both. 18 Capital gain. Combine columns (f) and (g) of line 1	7. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 18		

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

Name sh	nown on Form 1040-NR				Your identifying	number					
MANE	ESHA GORANTLA				802-53-84	146					
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 during the tax year? 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 per	rmanent resident) of the Un	ited States?			☐ Yes	⊠ 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. immigration status on the last day of the tax year. $_{\rm F1}$										
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 durin	g 2023. See instruc	ctions.							
	Note: If you're a resident of C				uent 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	Date departed United State	es	Date entered United State	es Date depa	rted United	States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy					
Н	Give number of days (including										
_	2021	, 2022	, and	2023 365	·	S					
I	Did you file a U.S. income tax					⊠ Yes	∐ No				
	If "Yes," give the latest year ar	ia form number you filea:		L040NR							
J	Are you filing a return for a trus					∐ Yes	⊠ No				
	If "Yes," did the trust have a U.S. person, or receive a contr					Yes	□No				
V						⊔ Yes □ Yes	⊔ No ⊠ No				
K	Did you receive total compens If "Yes," did you use an alterna					☐ Yes	□ No				
L	Income Exempt From Tax—If					_					
_	complete (1) through (3) below	. See Pub. 901 for more inf	ormation on tax tre	eaties.	-		-				
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefit	, and the				
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		(0.0						
	(a) Cou	ntry	(b) Tax treaty artic		ount of exe ourrent ta						
				claimed in prior tax ye	July moonie ii	T OdiTont to					
	(e) Total. Enter this amount or	n Form 1040-NR, line 1k. D	o not enter it anyw	here else on line 1							
2.	Were you subject to tax in a fo		-			Yes	☐ No				
3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?										
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to yo	our return.							
M	Check the applicable box if:										
1.	This is the first year you are may with a U.S. trade or business u						onnected .				
2.	You have made an election in										
	States as effectively connected										