IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

| Тахрау | er's name | Social securi | ty numbe | r |
|--------|--|-------------------|-------------|-----------|
| FAR | AZ ALI SYED | 196-97 | -8430 | |
| Spouse | 's name | Spouse's soc | cial securi | ty number |
| Par | Tax Return Information – Tax Year Ending December 31, 2023 (Enter | ⊥ r year you a | are auth | orizing.) |
| 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 | 69,243. |
| 2 | Total tax | | 2 | 0. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 13,288. |
| 4 | Amount you want refunded to you | | 4 | 13,288. |
| 5 | Amount you owe | | 5 | |

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

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

| | | | | ERO firm name | , | E | 1 |
|----|-----------|--------|-------|---------------|-----------------------------|---|---|
| ΧI | authorize | GLOBAL | TAXES | LLC | to enter or generate my PIN | | / |

| Ent | 8 er fiv n't er | 4 ve di | 3 gits, | 0 but | as my |
|-----|-----------------------|------------|------------|----------|-------|
| _ | | | | _ | |

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 🕨

Date 🕨

Spouse's PIN: check one box only

I authorize

| to | enter | or | generate | mv | PIN |
|----|-------|----|----------|------|-----|
| ιO | enter | 0I | yenerale | IIIY | |

as mv Enter five digits, but don't enter all zeros

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 Certification and Authentication – Pr | actitioner PIN Method Only | | | | | | |
| ERO's EFIN/PIN. Enter your six-digit EFIN followed by y | bur 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 Don't Submi | | | | | | | | | |
| For Department Deduction Act Nation and vous | | Earm 8870 (Boy, 01 2021) | | | | | | | |

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

| 1040 |)_ | NR Department of the Treasury-Intern U.S. Nonresident Alic | al Revenue Service en Income Tax | Return | 2023 | OMB No. | 1545-0074 | or st | e Only—Do aple in this | space. |
|--|-----------|--|---|---------------------------|---|-------------------|--------------|---|---------------------------|------------|
| For the year Jar | ı. 1- | Dec. 31, 2023, or other tax year beginnin | ning, 2023, ending | | | | , 20 | See separate | | |
| Your first name | and | middle initial | Last name | | | | | Your identifying number (see instructions) | | |
| FARAZ ALI | - | | SYED | | | | `` | -97- | , | |
| | | hber and street). If you have a P.O. box, | | | | | | 51 | Apt. n | 10. |
| 367 SANTA | | , . | | | | | | | 4003 | |
| | | office. If you have a foreign address, also | o complete spaces bel | ow. | | State | | ZIP c | | |
| SAN JOSE | | | | | | CA | | 951 | 28 | |
| Foreign country | nar | ne | Foreign province/state | /county | | - | n postal c | - | - | |
| | | | | | | | | | | |
| Filing Status Check only one box. | - | Single Married filing separ | nild's name if the qualif | ying perso | | ot your de | pendent: | state | | Trust |
| Digital Assets | At oth | any time during 2023, did you: (a) receiv erwise dispose of a digital asset (or a fir | e (as a reward, award, nancial interest in a dig | or paymen ital asset)? | t for property or (See instructions) | services); s.) | or (b) sell | , excha | ange, or Yes | 🗙 No |
| Dependents | | | | | | (4) | Check the b | ox if qua | alifies for (s | ee inst.): |
| (see instructions): | | | (2) Depende identifying nu | | | с | hild tax cre | dit | Credit for | |
| | - | (1) First name Last name | | | (3) Relationship to | you | | | depende | ents |
| If more than four | | | | | | | | | | |
| dependents, see | | | | | | | | | | |
| instructions and check here | | | | | | | | | | |
| | 1a | Total amount from Form(s) W-2, box | 1 (see instructions) | | | | . 1 | a | 79.0 | 057. |
| Effectively | b | | · , | | | | | - | , , , , | |
| Connected | c | | | | | | | - | | |
| With U.S. | d | | | | | | | - | | |
| Trade or | e | Taxable dependent care benefits from | | | | | | - | | |
| Business | f | Employer-provided adoption benefits | | | | | | - | | |
| Buomooo | g | | | | | | . 1 | a | | |
| Attach | h | | | | | | | | | |
| Form(s) W-2, 1042-S, | i | Reserved for future use | | | | | | | | |
| SSA-1042-S, | j | Reserved for future use | | | | | . 1 | j | | |
| RRB-1042-S, and 8288-A | k | Total income exempt by a treaty from | Schedule OI (Form 10 | 40-NR), ite | m L, 📗 📗 | | | | | |
| here. Also | | line 1(e) | | | . 1k | | | | | |
| attach | z | Add lines 1a through 1h | | | | | . 1 | z | 79,0 | 057. |
| Form(s) 1099-R if | 2a | Tax-exempt interest 2a | | b Taxal | ble interest | | . 2 | b | | |
| tax was | 3a | Qualified dividends 3a | | b Ordin | ary dividends . | | . 3 | b | | |
| withheld. | 4a | IRA distributions 4a | | | ble amount | | | b | | |
| lf you did not get a Form | 5a | Pensions and annuities 5a | | | ble amount | | | - | | |
| W-2, see | 6 | Reserved for future use | | | | | | | | |
| instructions. | 7 | Capital gain or (loss). Attach Schedul | | | • | | | | | |
| | 8 | Additional income from Schedule 1 (F | | | | | | | | 814. |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8 | • | - | | | |) | 69, | 243. |
| | 10 | Adjustments to income from Schedu income | le 1 (Form 1040), line : | | | - | | D | | |
| | 11 | Subtract line 10 from line 9. This is yo | our adjusted gross inc | ome . | | | . 1 | 1 | 69, | 243. |
| | 12 | Itemized deductions (from Schedule deduction (see instructions) | | | | | | 2 | 13. | 850. |
| | 13a | Qualified business income deduction | | | | | | | - / | |
| | b | | | | | | | | | |
| | c | | , | | | | . 13 | c | | |
| | 14 | | | | | | | 4 | 13, | 850. |
| | 15 | Subtract line 14 from line 11. If zero c | or less, enter -0 This is | s your taxa | ble income | <u></u> | . 1 | 5 | 55 , | 393. |
| | | | | | | | | | | |

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

Form **1040-NR** (2023)

| 2023) | | | | | Page 2 |
|----------------|---|--|---|---|---|
| 16 | Tax (see instructions). Check if any from Form(| (s): 1 🗌 8814 2 🗌 | 4972 3 | 1 | 6 7,490. |
| 17 | Amount from Schedule 2 (Form 1040), line 3 | | | 1 | 0. |
| 18 | | | | | 18 7,490. |
| 19 | Child tax credit or credit for other dependent | ts from Schedule 8812 (Form | n 1040) | 🗖 | 9 |
| 20 | | | | | 20 7,490. |
| 21 | | | | | 21 7,490. |
| 22 | | | | | 22 0. |
| 23a | | | | | |
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| b | | | | | |
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| | () | | | | 5d 13,288. |
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| 31 | · · · · · · · · · · · · · · · · · · · | | | | |
| 32 | | | | | 32 |
| 33 | | | | | 13,288. |
| 34 | | | - | | 13,288. |
| 35a | | | | | 5a 13,288. |
| b | - | | Checking | Savings | |
| d | Account number 5 5 3 7 0 7 9 | 8 3 1 | | | |
| е | If you want your refund check mailed to an a | address outside the United S | States not shown on | page 1, | |
| | enter it here. | | | | |
| 36 | Amount of line 34 you want applied to your | 2024 estimated tax | 36 | | |
| 37 | | - | | | |
| | For details on how to pay, go to www.irs.gov | //Payments or see instruction | ns | 🔤 | 37 |
| 38 | Estimated tax penalty (see instructions) . | | 38 | | |
| Do yo | u want to allow another person to discuss this | s return with the IRS? See in | structions. | es. Complete | below. 🛛 No |
| Desig | lee's | Phone | Persor | nal identificat | ion |
| name | | | numbe | er (PIN) | |
| | penalties of perjury, I declare that I have examined the | his return and accompanying scl | | | |
| | | | | | |
| Yours | ignature D | Date Your occupa | tion | | S sent you an Identity |
| | | | | | ion PIN, enter it here |
| | | DATA ENG | JINEER | (see ins | t.) |
| | | | | | |
| Prepa | rer's name Preparer's s | signature | Date | PTIN | Check if: |
| | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY | YA RAM SAGAR GUPTA TALI | AM 03/05/2024 | P0208270 | 3 Self-employed |
| SYAM | | | | | |
| SYAM Firm's | | | | Phone no. | (678)965-9522 |
| | 17 18 19 20 21 22 23a b c d 24 25 a b c d e f g 26 27 28 29 30 31 32 33 34 35a b d e f g 26 27 28 29 30 31 32 33 34 35a b d e f g 26 27 28 29 30 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e 57 28 29 30 31 32 33 34 35a b d e f g 20 31 32 33 34 35a b d e 57 28 29 30 31 32 33 34 35a b b d e F b b c f f g 27 28 29 30 31 32 35 37 7 7 8 29 30 37 37 38 Do you Phone | 17 Amount from Schedule 2 (Form 1040), line 3 18 Add lines 16 and 17 | 17 Amount from Schedule 2 (Form 1040), line 3 | 17 Amount from Schedule 2 (Form 1040), line 3 | 17 Amount from Schedule 2 (Form 1040), line 3 1 18 Add lines 16 and 17 1 10 Child tax credit or credit for other dependents from Schedule 812 (Form 1040) 1 20 Amount from Schedule 3 (Form 1040), line 8 2 21 Add lines 19 and 20 2 23 Subtract line 21 from line 18. If zero or less, enter -0 2 23a Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15 2 24 Add lines 22 and 23d. This is your total tax 2 25 Federal income tax withheld from: 2 a Form(s) 1099 2 25 Foderal income tax withheld from: 2 26 Corter forms (see instructions) 2 27 Zefa 1.3, 2.88. 28 2 2 29 Form(s) 1042-S 2 29 Form(s) 8806 2 2 2023 estimated tax payments and amount applied from 2022 returm 2 29 Form(s) 8806 2 2 20 Reserved for future use 30 31 |

| SCHEDULE | 1 |
|-------------|---|
| (Form 1040) | |

Department of the Treasury

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number FARA

| FARA | Z ALI SYED | | 196-97 | -8430 | 0 |
|--------|---|---------------|--------|----------|--------------------|
| Par | t I Additional Income | | | | |
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | | | 1 | |
| 2a | Alimony received | | 2 | a | |
| b | Date of original divorce or separation agreement (see instructions): | | | | |
| 3 | Business income or (loss). Attach Schedule C | | | 3 | |
| 4 | Other gains or (losses). Attach Form 4797 | | | 4 | |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta | ach Schedule | Ε. | 5 | -9,814. |
| 6 | Farm income or (loss). Attach Schedule F. | | | 6 | |
| 7 | Unemployment compensation | | | 7 | |
| 8 | Other income: | | | | |
| а | Net operating loss | 8a (|) | | |
| b | Gambling | 8b | | | |
| С | Cancellation of debt | 8c | | | |
| d | Foreign earned income exclusion from Form 2555 | 8d (|) | | |
| е | Income from Form 8853 | 8e | | | |
| f | Income from Form 8889 | 8f | | | |
| g | Alaska Permanent Fund dividends | 8g | | | |
| ĥ | Jury duty pay | 8h | | | |
| i | Prizes and awards | 8i | | | |
| j | Activity not engaged in for profit income | 8j | | | |
| k | Stock options | 8k | | | |
| I | Income from the rental of personal property if you engaged in the rental | | | | |
| | for profit but were not in the business of renting such property | 81 | | | |
| m | Olympic and Paralympic medals and USOC prize money (see | | | | |
| | instructions) | 8m | | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | | |
| 0 | Section 951A(a) inclusion (see instructions) | 80 | | | |
| р | Section 461(I) excess business loss adjustment | 8p | | | |
| q | Taxable distributions from an ABLE account (see instructions) | 8q | | | |
| r | Scholarship and fellowship grants not reported on Form W-2 | 8r | | | |
| S | Nontaxable amount of Medicaid waiver payments included on Form | | | | |
| | 1040, line 1a or 1d | 8s (|) | | |
| t | Pension or annuity from a nonqualifed deferred compensation plan or | | | | |
| | a nongovernmental section 457 plan | 8t | | | |
| u | Wages earned while incarcerated | 8u | | | |
| z | Other income. List type and amount: | | | | |
| _ | | 8z | | | |
| 9 | Total other income. Add lines 8a through 8z | | | 9 | |
| 10 | Combine lines 1 through 7 and 9. This is your additional income . Enter 1040, 1040, SP, or 1040, NP, line 9. | r here and on | Form | | 0 014 |
| Far D- | 1040, 1040-SR, or 1040-NR, line 8 | | | 0 | -9,814. |
| FOR Pa | perwork neulclion Act Nolice, see your lax return instructions. | | Sch | iedule 1 | 1 (Form 1040) 2023 |

| Part | Adjustments to Income | | | | | |
|--------|---|-------|-------------|---------|-----|----------------------|
| 11 | Educator expenses | | | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee | -basi | s aove | ernment | | |
| | officials. Attach Form 2106 | | | | 12 | |
| 13 | Health savings account deduction. Attach Form 8889 | | | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form 3903 | | | | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | | | 16 | |
| 17 | Self-employed health insurance deduction | | | | 17 | |
| 18 | Penalty on early withdrawal of savings | | | | 18 | |
| 19a | Alimony paid | | | | 19a | |
| b | Recipient's SSN | | | | | |
| C | Date of original divorce or separation agreement (see instructions): | | | | | |
| 20 | IRA deduction | | | | 20 | |
| 21 | Student loan interest deduction | | | | 21 | |
| 22 | Reserved for future use | | | | 22 | |
| 23 | Archer MSA deduction | | | | 23 | |
| 24 | Other adjustments: | | | | | |
| | | 24a | | | | |
| | Deductible expenses related to income reported on line 81 from the | | | | | |
| ~ | | 24b | | | | |
| с | Nontaxable amount of the value of Olympic and Paralympic medals | | | | | |
| Ŭ | and USOC prize money reported on line 8m | 24c | | | | |
| d | Reforestation amortization and expenses | 24d | | | | |
| e | Repayment of supplemental unemployment benefits under the Trade | | | | | |
| · | Act of 1974 | 24e | | | | |
| f | Contributions to section 501(c)(18)(D) pension plans | 24f | | | | |
| | Contributions by certain chaplains to section 403(b) plans | 24g | | | | |
| | Attorney fees and court costs for actions involving certain unlawful | 9 | | | | |
| | discrimination claims (see instructions) | 24h | | | | |
| i | Attorney fees and court costs you paid in connection with an award | | | | | |
| • | from the IRS for information you provided that helped the IRS detect | | | | | |
| | tax law violations | 24i | | | | |
| i | Housing deduction from Form 2555 | 24j | | | | |
| , k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | | | | | |
| •• | 1041) | 24k | | | | |
| z | Other adjustments. List type and amount: | | | | | |
| - | | 24z | | | | |
| 25 | Total other adjustments. Add lines 24a through 24z | | _ | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income | | | and on | | |
| | Form 1040, 1040-SR, or 1040-NR, line 10 | | | | 26 | |
| | BAA | | 02/22/24 PF | | | le 1 (Form 1040) 202 |

Additional Credits and Payments

OMB No. 1545-0074 2 (

3

Attach to Form 1040, 1040-SR, or 1040-NR.

| | nent of the Treasury Revenue Service | | | | | | Attachment Sequence No. 03 |
|--------|---|---|------|--------|--------|------|-------------------------------|
| | . , | rm 1040, 1040-SR, or 1040-NR | | | | | security number |
| FAR | AZ ALI SYED | undable Credits | | | 196-9 | 97-8 | 430 |
| | | | | | | 4 | |
| 1 2 | U U | credit. Attach Form 1116 if required | | | | 1 | |
| 2 | Form 2441 | | | | | 2 | |
| 3 | Education c | redits from Form 8863, line 19 | | | | 3 | |
| 4 | Retirement s | savings contributions credit. Attach Form 8880 | | | | 4 | |
| 5a | Residential of | clean energy credit from Form 5695, line 15 | | | | 5a | |
| b | Energy effic | ient home improvement credit from Form 5695, line 32 | | | | 5b | |
| 6 | Other nonre | fundable credits: | | | | | |
| а | General bus | iness credit. Attach Form 3800 | 6a | | | | |
| b | Credit for pr | ior year minimum tax. Attach Form 8801 | 6b | | | | |
| С | Adoption cre | edit. Attach Form 8839............. | 6c | | | | |
| d | Credit for th | e elderly or disabled. Attach Schedule R | 6d | | | | |
| е | Reserved fo | r future use | 6e | | | | |
| f | Clean vehicl | e credit. Attach Form 8936 | 6f | 7 | 7,490. | _ | |
| g | Mortgage in | terest credit. Attach Form 8396 | 6g | | | _ | |
| h | District of Co | olumbia first-time homebuyer credit. Attach Form 8859 | 6h | | | - | |
| i | Qualified ele | ctric vehicle credit. Attach Form 8834 | 6i | | | - | |
| j | Alternative fu | uel vehicle refueling property credit. Attach Form 8911 | 6j | | | | |
| k | Credit to ho | Iders of tax credit bonds. Attach Form 8912 | 6k | | | - | |
| I | Amount on I | Form 8978, line 14. See instructions | 61 | | | - | |
| m | Credit for pr | eviously owned clean vehicles. Attach Form 8936 . | 6m | | | - | |
| z | Other nonre | fundable credits. List type and amount: | | | | | |
| | | | 6z | | | | |
| 7 | | nonrefundable credits. Add lines 6a through 6z | | | | 7 | 7,490. |
| 8 | | through 4, 5a, 5b, and 7. Enter here and on Form 1 | 040, | 1040-8 | SR, or | _ | |
| | 1040-NR, lir | ne 20 | | | | 8 | 7,490. |
| | | | | | (CC | mun | ued on page 2) |

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023

| Par | t II Other Payments and Refundable Credits | | | |
|-----|---|-------------------|--------|------------------------|
| 9 | Net premium tax credit. Attach Form 8962 | | 9 | |
| 10 | Amount paid with request for extension to file (see instructions) . | | 10 | |
| 11 | Excess social security and tier 1 RRTA tax withheld | | 11 | |
| 12 | Credit for federal tax on fuels. Attach Form 4136 | | 12 | |
| 13 | Other payments or refundable credits: | | | |
| а | Form 2439 | 13a | | |
| b | Credit for repayment of amounts included in income from earlier years | 13b | | |
| С | Elective payment election amount from Form 3800, Part III, line 6, column (i) | 13c | | |
| d | Deferred amount of net 965 tax liability (see instructions) | 13d | | |
| z | Other payments or refundable credits. List type and amount: | | | |
| | | 13z | | |
| 14 | Total other payments or refundable credits. Add lines 13a through | 13z | 14 | |
| 15 | Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31 | D-SR, or 1040-NR, | 15 | |
| | BAA REV | 02/22/24 PRO | Schedu | ule 3 (Form 1040) 2023 |

| SCHEDULE NEC |
|----------------|
| (Form 1040-NR) |

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Department of the Treasury Internal Revenue Service Name shown on Form 1040-NR

Attachment Sequence No. **7B**

2

FARAZ ALI SYED

Your identifying number

196-97-8430

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

| Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | (d) Other (specify) | | |
|--|--|---|-------------------------------------|-------------------------------|---------------------|-------------------------|--|--|
| | | | | | (c) 30% | % | % | |
| 1 | Dividends and divide | nd equivalents: | | | | | | |
| а | Dividends paid by U. | S. corporations | 1 | a | | | | |
| b | Dividends paid by for | reign corporations | 1 | b | | | | |
| с | Dividend equivalent p | ayments received with respect to section 871(m |) transactions | c | | | | |
| 2 | Interest: | | | | | | | |
| а | Mortgage | | 2 | a | | | | |
| b | | prations | | b | | | | |
| с | | | | c | | | | |
| 3 | | atents, trademarks, etc.) | | 3 | | | | |
| 4 | • | copyright royalties | | 1 | | | | |
| 5 | | rights, recording, publishing, etc.) | | 5 | | | | |
| 6 | | e and natural resources royalties | | 3 | | | | |
| 7 | | es | | 7 | | | | |
| 8 | | its | | 3 | | | | |
| 9 | • | e 18 below | |) | | | | |
| 10 | | s of Canada only. Enter net income in column | | | | | | |
| а | Winnings | | | | | | | |
| b | Losses | | 10 |)c | | | | |
| 11 | Gambling—Resident Note: Enter winnings | s of countries other than Canada. | 1 | 1 | | | | |
| 12 | Other (specify): | | | | | | | |
| | | | | 2 | | | | |
| 13 | | 12 in columns (a) through (d) | | 3 | | | | |
| 14 | Multiply line 13 by r | ate of tax at top of each column | 1 | 4 | | | | |
| 15 | Tax on income not e | ffectively connected with a U.S. trade or busin | | | | | -NR, line 23a 15 | |
| | | Capital Gains a | nd Losses Fro | m 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 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 | | 16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) | (b) Date acquired mm/dd/yyyy | d (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). |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (Form 1 | • | | | | | | | |
| exchan | property sales or ges that are effectively | | | | | | | |
| | ted with a U.S. business edule D (Form 1040). | 17 Add columns (f) and (g) of line 16 . | | | | | | |
| | 797, or both. | 18 Capital gain. Combine columns (f) an | d (g) of line 17. E | nter the net gain her | e and on line 9 abo | ove. If a loss, ente | er-0 18 | |

SCHEDULE OI (Form 1040-NR)

Department of the Treasury Internal Revenue Service

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 |
|--------------|---------------------------------------|
| 1 . | 2023 Attachment Sequence No. 7C |
| Your identif | ying number |

| Name sl | Your identifying number | | | | | | |
|---------|---|---------------------------------------|-------------------------|---|--|--------|--|
| FARA | AZ ALI SYED | | | | 196-97-8430 | | |
| Α | Of what country or countries w | vere you a citizen or nation | al during the tax y | ear? INDIA | | | |
| В | In what country did you claim | residence for tax purpose | s during the tax y | ear? United States | | | |
| С | Have you ever applied to be a | t) of the United States? . | 🗌 Yes 🛛 | No | | | |
| D | Were you ever: | | | | | | |
| | | | | | | | |
| 2. | A green card holder (lawful per | , | | | 🗌 Yes 🛛 | No | |
| _ | If you answer "Yes" to (1) or (2 | | • | | | | |
| E | If you had a visa on the last of immigration status on the last of | day of the tax year. $F1$ | | | | | |
| F | Have you ever changed your v If you answered "Yes," indicat | e the date and nature of the | e change: | | | No | |
| G | List all dates you entered and | | • | | | | |
| | Note: If you're a resident of C | | | | | | |
| | check the box for Canada or | | | | | | |
| | Date entered United States mm/dd/yy | Date departed United Stat mm/dd/yy | es | Date entered United State mm/dd/yy | s Date departed United Sta mm/dd/yy | ates | |
| | iiiii/dd/yy | ППЛОСЛУУ | | min/dd/yy | Thin/dd/yy | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| н | Give number of days (including | vacation, nonworkdays, and | d partial days) you | were present in the United | States during: | | |
| | | , 2022 | | | | | |
| I | Did you file a U.S. income tax If "Yes," give the latest year ar | return for any prior year? . | | | 🗌 Yes 🛛 | No | |
| J | Are you filing a return for a trus | st? | | | 🗌 Yes 🛛 | No | |
| | If "Yes," did the trust have a UU.S. person, or receive a control | | | | | No | |
| κ | Did you receive total compens | ation of \$250,000 or more | during the tax yea | ar? | 🗌 Yes 🛛 | No | |
| | If "Yes," did you use an alterna | | | • | | No | |
| L | Income Exempt From Tax—If complete (1) through (3) below | | | | tax treaty with a foreign cou | untry, | |
| 1. | Enter the name of the country, amount of exempt income in the | | | | claimed the treaty benefit, and | d the | |
| | (a) Cou | ntry | (b) Tax treaty art | icle (c) Number of month claimed in prior tax ye | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Total. Enter this amount of | n Form 1040-NR, line 1k. D | o not enter it any | where else on line 1 | | | |
| 2. | Were you subject to tax in a for | reign country on any of the | e income shown ir | 1(d) above? | 🗌 Yes 🗌 | No | |
| 3. | Are you claiming treaty benefit | • | - | | 🗌 Yes 🛛 | No | |
| _ | If "Yes," attach a copy of the C | Competent Authority detern | nination letter to y | our return. | | | |
| M | Check the applicable box if: | | , . | | | | |
| | This is the first year you are moving with a U.S. trade or business u | under section 871(d). See ir | nstructions | | | | |
| 2. | You have made an election in States as effectively connected | | | | | nited | |

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

| SCHEDULE | Ε |
|-------------|---|
| (Form 1040) | |

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to *www.irs.gov/ScheduleE* for instructions and the latest information.

| .) | 2023 |
|----|--------------------------------------|
| | Attachment Sequence No. 13 |

| Name(s | ame(s) shown on return Your social security number | | | | | | | | |
|----------|---|----------|----------------|--------|----------|---------------|--------------|----------|------------|
| FARA | RAZ ALI SYED 196-97-8430 | | | | | | | | |
| Part | I Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper | d Ro | yalties | C See | instruc | tions If you | are an indiv | idual r | anort farm |
| | rental income or loss from Form 4835 on page 2, line 40. | ty, use | Schedule | 0.000 | institut | ,tions. n you | | iuuai, i | eportiann |
| Α | Did you make any payments in 2023 that would require you | to file | Form(s) 1 | 099? S | ee ins | tructions . | | . 🗆 ` | res 🛛 No |
| В | f "Yes," did you or will you file required Form(s) 1099? . | | | | | | | . 🗆 ` | res 🗌 No |
| 1a | Physical address of each property (street, city, state, ZIF | P cod | e) | | | | | | |
| Α | 102, AMAN PLAZA JAFAR NAGAR, NAGPUR MAH | HARAS | SHTRA I | N 440 | 0013 | | | | |
| В | | | | | | | | | |
| С | | | | | | | | | |
| 1b | Type of Property 2 For each rental real estate prope | | | | Fa | r Rental | Person | | QJV |
| | (from list below) above, report the number of fair | | | | | Days | Da | - | |
| <u>A</u> | 3 personal use days. Check the Quite if you meet the requirements to f | | | Α | | 365 | | 0 | |
| <u> </u> | qualified joint venture. See instru | ictions | S. | B | | | | | |
| <u> </u> | | | | С | | | | | |
| | of Property: | 4 - 1 | 5 1 and | | - | | | | |
| | Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial | tai | 5 Land | | | Self-Rental | | | |
| 2 | Multi-Family Residence 4 Commercial | | 6 Roya | lities | 8 | Other (desc | (edin: | | |
| | | | | | | Propert | ies: | | |
| Incon | ne: | | | Α | | В | | | С |
| 3 | Rents received | 3 | | 6 | 42. | | | | |
| 4 | Royalties received | 4 | | | | | | | |
| Expe | | _ | | | | | | | |
| 5 | Advertising | 5 | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | 1 - | 10 | | | | |
| 7 | Cleaning and maintenance | 7 | | 1,5 | 43. | | | | |
| 8 | | 8 | | | | | | | |
| 9 | | 9 | | | | | | | |
| 10 | Legal and other professional fees | 10 11 | | 1 1 | 2.0 | | | | |
| 11 12 | Management fees | 12 | | 1,1 | 30. | | | | |
| 13 | Other interest | 13 | | | | | | | |
| 14 | Repairs | 14 | | 2,7 | 85 | | | | |
| 15 | | 15 | | 2,3 | | | | | |
| 16 | | 16 | | | | | | | |
| 17 | | 17 | | 2,6 | 47. | | | | |
| 18 | Depreciation expense or depletion | 18 | | , - | - | | | | |
| 19 | Other (list) | 19 | | | | | | | |
| 20 | Total expenses. Add lines 5 through 19 | 20 | | 10,4 | 56. | | | | |
| 21 | Subtract line 20 from line 3 (rents) and/or 4 (royalties). If | | | | | | | | |
| | result is a (loss), see instructions to find out if you must | | | | | | | | |
| | file Form 6198 | 21 | | -9,8 | 14. | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) | 22 | (| -9,81 | 4.) | |) | (|) |
| 23a | Total of all amounts reported on line 3 for all rental prope | erties | | | 23a | | 642. | | |
| b | Total of all amounts reported on line 4 for all royalty prop | erties | | | 23b | | | | |
| С | Total of all amounts reported on line 12 for all properties | | | | 23c | | | | |
| d | Total of all amounts reported on line 18 for all properties | | | | 23d | | | | |
| е | Total of all amounts reported on line 20 for all properties | | | | 23e | 10 | 0,456. | | |
| 24 | Income. Add positive amounts shown on line 21. Do not | | | | · · | | . 24 | , | |
| 25 | Losses. Add royalty losses from line 21 and rental real estat | | | | | | | | 9,814.) |
| 26 | Total rental real estate and royalty income or (loss). here. If Parts II, III, and IV, and line 40 on page 2 do no | | | | | | | | |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

26

-9,814.

| Form 8936 | |
|----------------------------|--|
| Department of the Treasury | |

Clean Vehicle Credits

OMB No. 1545-2137 9**07**

| | ent of the Treasury Revenue Service | Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the late | est info | ormation. | | At Se | tachment equence No. 69 |
|-----------|--|---|----------|-------------|-------------|-----------------|----------------------------|
| | shown on return | | | | Identifying | | |
| FARA | Z ALI SYED |) | | | 196-9 | 7-84 | 30 |
| Notes | Complete a | a separate Schedule A (Form 8936) for each clean vehicle placed | n serv | ice durinc | the tax | vear. | |
| | | completing Parts II, III, or IV, must also complete Part I. See "Not | | - | , | <i>j</i> e u. : | |
| Part | | d Adjusted Gross Income Amount | 0 10/1 | | | | |
| | | unt from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR | 1a | 60 | ,243. | | |
| b | | me from Puerto Rico you excluded | 1b | 0.5 | ,243. | | |
| c | - | unt from Form 2555, line 45 | 10 | | | | |
| d | - | unt from Form 2555, line 50 | 1d | | | | |
| e | - | unt from Form 4563, line 15 | 1e | | | | |
| 2 | | nrough 1e | IE | | | 2 | 60 212 |
| ∠ 3a | | unt from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR | 3a | | • • | 2 | 69,243. |
| | | • | 3b | | | | |
| b | - | me from Puerto Rico you excluded | | | | | |
| C | - | unt from Form 2555, line 45 | 3c | | | | |
| d | - | unt from Form 2555, line 50 | 3d | | | | |
| e | - | unt from Form 4563, line 15 | 3e | | | 4 | |
| 4 | | | | | • • | 4 | |
| 5 Part | | Iler of line 2 or line 4 | | | | 5 | 69,243. |
| 6 | qualifying Enter the total | dividuals can't claim a credit on line 6 if Part I, line 5, is more than a surviving spouse; \$225,000 if head of household). credit amount figured in Part II of Schedule(s) A (Form 8936) . | | · · · | · · · | 6 | |
| 7 | | icle credit from partnerships and S corporations (see instructions) | | | | 7 | |
| 8 | and report this | stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 | | | | 8 | 0. |
| Part | Note: Yo | or Personal Use Part of New Clean Vehicles ou can't claim the Part III credit if Part I, line 5, is more than \$ g surviving spouse; \$225,000 if head of household). | 150,00 | 00 (\$300,0 | 000 if m | arried | filing jointly or a |
| 9 | Enter the total | credit amount figured in Part III of Schedule(s) A (Form 8936) . | | | | 9 | 7,500. |
| 10 | Enter the amo | unt from Form 1040, 1040-SR, or 1040-NR, line 18 | | | | 10 | 7,490. |
| 11 | Personal credi | ts from Form 1040, 1040-SR, or 1040-NR (see instructions) | | | | 11 | · · · · · |
| 12 | Subtract line 1 part of the cree | 1 from line 10. If zero or less, enter -0- and stop here. You can't dit | claim t | he persor | nal use | 12 | 7 400 |
| 13 | | part of credit. Enter the smaller of line 9 or line 12 here and | on Sc | hadula 3 | (Form | 12 | 7,490. |
| | 1040), line 6f. | f line 12 is smaller than line 9, see instructions | | | | 13 | 7,490. |
| Part | | or Previously Owned Clean Vehicles | | | | | |
| | | bu can't claim the Part IV credit if Part I, line 5, is more than a surviving spouse; \$112,500 if head of household). | \$75,00 | 0 (\$150,0 | 000 if ma | arried | filing jointly or a |
| 14 | Enter the total | credit amount figured in Part IV of Schedule(s) A (Form 8936) . | | | | 14 | |
| 15 | Enter the amo | unt from Form 1040, 1040-SR, or 1040-NR, line 18 | | | | 15 | |
| 16 | Personal credi | ts from Form 1040, 1040-SR, or 1040-NR (see instructions) | | | | 16 | |
| 17 | | 6 from line 15. If zero or less, enter -0- and stop here. You can't c | | | | 17 | |
| 18 | | aller of line 14 or line 17 here and on Schedule 3 (Form 1040) | | | | | |
| | smaller than lin | ne 14, see instructions | | | | 18 | |
| Part | | or Qualified Commercial Clean Vehicles | | | | I | |
| 19 | Enter the total | credit amount figured in Part V of Schedule(s) A (Form 8936) . | | | | 19 | |
| 20 | | nercial clean vehicle credit from partnerships and S corporations (| | | | 20 | |

Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1aa

For Paperwork Reduction Act Notice, see separate instructions. BAA

21

REV 02/22/24 PRO

Form 8936 (2023)

21

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

| (FOII | 1 0930) | | | シークス |
|---------|---|---|---------------|---------------------------------------|
| | | Attach to your tax return. | | |
| | nent of the Treasury Revenue Service | Go to www.irs.gov/Form8936 for instructions and the latest informat | ion. | Attachment Sequence No. 69A |
| Name(s) |) shown on return | | Identi | fying number |
| - | AZ ALI SYEI | | 196 | -97-8430 |
| Part | Vehicle | Details | | |
| 1a | Year | | | 2023 |
| b | Make | | TES | LA |
| с | Model | | 3 | |
| 2 | Vehicle identif | cation number (VIN) (see instructions) 5 Y J 3 E 1 E A 6 | 5 P | F 6 2 5 2 0 0 |
| 3 | Enter date veh | _08/ | 19/2023 | |
| 4 | | e used primarily outside the United States? Answer "No" if it was but an exception here. You can't claim a credit amount for a vehicle used primarily outside the Un | | |
| 5 | Does the VIN e definitions. X Yes. Go to No. Go to | | year? : | See instructions for |
| 6 | | | 2 and | placed in service during |
| 7 | | entered on line 2 belong to a qualified commercial clean vehicle acquired after year? See instructions for definitions. Part V. | 2022 : | and placed in service |
| | | ere. You can't use this schedule to figure a credit amount for a vehicle not desci | ribed c | on line 5, 6, or 7. |
| Part | Credit A | mount for Business/Investment Use Part of New Clean Vehicle | | |
| 8 | another person | e the vehicle for use or to lease to others, and not for resale? Answer "No" if you n. here. You can't claim a credit amount for a vehicle you didn't acquire for use or to | | - |
| 9 | Tentative cred | it amount (see instructions) | 9 | 7,500. |
| 10 | Business/inve | stment use percentage (see instructions) | 10 | % |
| 11 | entered 100% | by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you on line 10, stop here. Otherwise, go to Part III below | 11 | 0. |
| Part | Credit A | mount for Personal Use Part of New Clean Vehicle | <u>т т</u> | |
| 12 | Subtract line 1 Part III of Form | 1 from line 9 in Part II. Stop here and include this credit amount on line 9 in 8936 | 12 | 7,500. |
| For Pa | | ion Act Notice, see the Form 8936 instructions. BAA REV 02/22/24 | I | Schedule A (Form 8936) 2023 |

| Schedu | e A (Form 8936) 2023 | Page 2 |
|--------|--|---------------------------------|
| Part | V Credit Amount for Previously Owned Clean Vehicle | |
| 13a | Is the sales price of the vehicle more than \$25,000? | |
| | ☐ Yes. Stop here. The vehicle doesn't qualify for the Part IV credit. | |
| | □ No. | |
| h | Did you acquire the vehicle for use and not for receive? Answer "Ne" if you are lessing the vehicle | a from another person |
| b | Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle | e from another person. |
| | Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a | oquired for resale |
| | | equired for resale. |
| С | Can you be claimed as a dependent on another person's tax return, such as your parent's retu | rn? |
| | ☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent. | |
| | □ No. | |
| h | le the vehicle a qualified fuel call mater vehicle? See instructions | |
| d | Is the vehicle a qualified fuel cell motor vehicle? See instructions. | |
| | ☐ Yes. ☐ No. | |
| | | |
| | | |
| 14 | Enter the sales price of the vehicle | 14 |
| | | |
| 15 | Multiply line 14 by 30% (0.30) | 15 |
| | | |
| 16 | Maximum vehicle credit amount | 16 4,000. |
| | | |
| 17 | Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line | |
| | 14 in Part IV of Form 8936 | 17 |
| Part | V Credit Amount for Qualified Commercial Clean Vehicle | |
| 18a | Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exce | eption for certain tax-exempt |
| | entities discussed in the instructions applies. | |
| | Yes. | |
| | □ No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception | applies. |
| b | Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you | are leasing the vehicle from |
| D | another person. | are leasing the vehicle norm |
| | | |
| | No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to | lease to others or acquired for |
| | resale. | |
| | | |
| С | Is the vehicle also powered by gas or diesel? See instructions. | |
| | Yes. | |
| | □ No. | |
| | | |
| 19 | Enter the cost or other basis of the vehicle. See instructions | 19 |
| | | |
| 20 | Section 179 expense deduction (see instructions) | 20 |
| | | |
| 21 | Subtract line 20 from line 19 | 21 |
| | | |
| 22 | Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"] | 22 |
| | | |
| 23 | Enter the incremental cost of the vehicle. See instructions | 23 |
| | | |
| 24 | Enter the smaller of line 22 or line 23 | 24 |
| | | |
| 25 | Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is | |
| | 14,000 pounds or more) | 25 |
| 26 | Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V | |
| - | of Form 8936 | 26 |

Schedule A (Form 8936) 2023