(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

	1.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0						
Submi	ssion Identification Number (SID)						
Taxpaye	r's name	Social securi	ty numl	per			
ASHI	LEY LAZARUS	441-81	141-81-8639				
Spouse's		Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	│ r vear vou a	re au	thorizina.)		
	whole dollars only on lines 1 through 5.	. , ,			<i>,</i>		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	15	,555.		
2	Total tax		2		171.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	,161.		
4	Amount you want refunded to you		4		990.		
	Amount you owe		5				
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)		
return (control to send for any Agent to paymer authorize paymer business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abooriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmorthy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for the financial taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received so days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the information of the payment (settlement) and the processor of the income tax return (original or amended) I all identification number (PIN) below is my signature for the income tax return (original or amended) I all identification number (PIN) below is my signature for the income tax return (original or amended) I all identification number (PIN) below is my signature for the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification in the context of the income tax return (original or amended) I all identification i	nitter, or electro ection of the to J.S. Treasury a licated in the to on to debit the e the authorizates processing of payment. I fur	onic reransmised ax prepartion. The receiff the eland and the receifther acceiments.	turn origina ssion, (b) the designated paration sof to this acco To revoke (eved no late ectronic pa	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
	nic Funds Withdrawal Consent. yer's PIN: check one box only						
X		my PIN 1	8 (5 3 9	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	asiny		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Your s	ignature ▶ Date ▶						
Spous	e's PIN: check one box only						
	I authorize to enter or generate	mv PIN			as my		
	ERO firm name	En		digits, but	a.c,		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below	1					
Part I	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 Don't ent	6 0	8 2 7	1		
		Don't Gill	J. un 20				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of I	nitting this retu	urn in a	accordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To	Do So					

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-Dec. 31, 2023, or other tax year begin				nning, 2023, ending, 20 _					20		See sepa	
Your first name	and r	middle initial	Last name				You	r ident	tifying nun			
								(see	(see instructions)			
ASHLEY			LAZARUS					44	441-81-8639			
Home address (numl	ber and street). If you have a P.O. bo	x, see ins	structions.							Apt.	no.
1013 BLOO	MFI	ELD STREET										
City, town, or po	ost of	ffice. If you have a foreign address, a	lso comp	olete spaces below.			S	tate		ZIF	code	
HOBOKEN							N	IJ		0.7	7030	
Foreign country	nam	е	Foreig	n province/state/county			F	oreign p	ostal	code		
Filing										Estate	· 🗆	Trust
Status		you checked the QSS box, enter the		•	son is a	child b	ut not yo	our depe	enden	t:		
Check only		•		, , , , , ,			,	·				
one box.			· ,					. ,	<i></i>			
Digital Assets		ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a						rices); or				⊠ No
Dependents				(0) Dan and anti-				(4) Che	eck the	box if o	qualifies for (
(see instructions):		(1) First name Last name		(2) Dependent's identifying number		(3) Relationship to yo		ou Child to		redit	Credit fo depend	
		(7)		, ,	(-,	(b) Holdionomp to you					Г	1
If more than four									Ħ			i
dependents, see instructions and									$\overline{\Box}$			i i
check here												<u>.</u>
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see	instructions)						1a	15,	555.
Effectively	b	Household employee wages not re	oorted or	n Form(s) W-2						1b		
Connected	С	Tip income not reported on line 1a	(see instr	ructions)					. [1c		
With U.S.	d	Medicaid waiver payments not repo	orted on	Form(s) W-2 (see instruc	tions) .					1d		
Trade or	е	Taxable dependent care benefits fr	om Form	2441, line 26						1e		
Business	f	Employer-provided adoption benef	its from F	Form 8839, line 29 .						1f		
Attack	g	g Wages from Form 8919, line 6								1g		
Attach Form(s) W-2,	h	h Other earned income (see instructions)										
1042-S,	i											
SSA-1042-S, RRB-1042-S,	j	j Reserved for future use										
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		,,	item L,	1k						
attach	z	Add lines 1a through 1h				٠				1z	15,	555.
Form(s) 1099-R if	2a	Tax-exempt interest 2	a	b Ta	kable int	erest .			. [2b		
tax was	За	Qualified dividends 3a b Ordinary dividends							. [3b		
withheld.	4a	IRA distributions 4	a	b Ta	kable an	nount .				4b		
If you did not	5a	Pensions and annuities 5	а	b Ta:	kable an	nount .				5b		
get a Form W-2, see	6	Reserved for future use								6		
instructions.	7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here								7		
	8	Additional income from Schedule 1 (Form 1040), line 10								8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income							. -	9	<u> </u>	555.
,	10	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income										
	11	Subtract line 10 from line 9. This is	your adj i	usted gross income						11	15,	,555.
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)									13.	,850.
	13a											
	b	Exemptions for estates and trusts of				13b						
	С	Add lines 13a and 13b	• (,		<u> </u>				13c		
	14	Add lines 12 and 13c							. [14	13,	850.
,	15	Subtract line 1/1 from line 11. If zero	or less	enter -0- This is your to	vabla in	como				15	1	705

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if ar	y from For	rm(s): 1	314 2	4972	2 3			16	171.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	171.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (F	orm 104	0) .			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	171.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),					23a				
	b	Other taxes, including self-empl 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 yo								24	171.
Payments	25	Federal income tax withheld from									
•	а	Form(s) W-2					25a		1,161.		
	b	Form(s) 1099				. [25b				
	С	Other forms (see instructions) .					25c				
	d	Add lines 25a through 25c								25d	1,161.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments ar	nd amount	applied from 20	22 return .					26	
	27	Reserved for future use				1	27				
	28	Additional child tax credit from S	Schedule 8	8812 (Form 1040)	. [28				
	29	Credit for amount paid with Forr	n 1040-C			. [29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form					31				
	32	Add lines 28, 29, and 31. These				_	ole cre	dits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	tal payme	nts .				33	1,161.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the	amount	you o	verpaid		34	990.
	35a									35a	990.
Direct deposit?	b	Routing number 0 2 1 2 0 2 3 3 7 c Type: X Checking Savings									
See instructions.	d	Account number 7 6 5 3 0 8 2 1 5									
	е	If you want your refund check m	nailed to a	n address outsic	le the Unite	ed State	s not s	hown on	page 1,		
		enter it here.									
	36	Amount of line 34 you want app					36				
Amount	37	Subtract line 33 from line 24. Th	is is the ar	nount you owe.							
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instruc	ctions .	٠.			37	
	38	Estimated tax penalty (see instru	ıctions) .				38				
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See	e instruc	tions.	□ Y	es. Compl	ete bel	ow. 🛛 No
Party Designee	Designee's Phone Personal identifiname no. number (PIN)							cation			
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of n belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h										
Sign	Yours	signature		Date	Your occu	upation			If the	e IRS s	ent you an Identity
Here			SOFTWARE ENGINEER					ection inst.)	PIN, enter it here		
İ	Phone	e no.		Email address							
Paid	Prepa	rer's name	Preparer	's signature			Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA	SYAM I	PRIYA RAM S	SAGAR G	UPTA	03/1	7/2024	P02082	2703	Self-employed
Preparer		name GLOBAL TAXES	LLC			-			Phone n		78)965-9522
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN										

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

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

Name shown on Form 1040-NR Your identifying number ASHLEY LAZARUS 441-81-8639 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
						(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign d	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m)	transactions	1c					
2	Interest:	-								
а	Mortgage				2a					
b			ns		2b					
С					2c					
3			, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8					8					
9	Capital gain from line 18 below				9					
10		s of C	anada only. Enter net income in column							
а	Winnings		<u></u>							
b	Losses		<u> </u>		10c					
11	Note: Enter winnings	only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13	•		columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not ef	ffectiv	ely connected with a U.S. trade or busine	ess. Add colum	ıns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040	-NR, line 23a 15	
			Capital Gains a	nd 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 acquire mm/dd/yyyy		(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 property interest; report these gains and losses on Schedule D										
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),									
Form 4797, or both.		18	Capital gain. Combine columns (f) and	d (g) of line 17	'. Ente	er 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

Attachment Sequence No. **7C**

Name sh	Name shown on Form 1040-NR Your identifying number										
ASHL	EY LAZARUS				441-81-8	539					
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 permanent resident) of the United States?										
D	Were you ever:										
1.	A U.S. citizen?										
2.	A green card holder (lawful permanent resident) of the United States?										
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1										
F	Have you ever changed your value of the second of the seco	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immigrat	tion status?		☐ Yes	⊠ No				
G	List all dates you entered and	left the United States durin	g 2023. See instruct	ions.							
	Note: If you're a resident of C				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	Date departed United State	es C	Date entered United State		rted United	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy					
Н	Give number of days (including 2021	vacation, nonworkdays, and									
I	Did you file a U.S. income tax	return for any prior year?.				⊠ Yes	☐ No				
	If "Yes," give the latest year ar					_	_				
J	Are you filing a return for a trust If "Yes," did the trust have a U.S. person, or receive a conti	J.S. or foreign owner unde	r the grantor trust ru	ules, make a distributior	or loan to a	∐ Yes	⊠ No □ No				
K	Did you receive total compens					☐ Yes	⊠ No				
	If "Yes," did you use an alterna					☐ Yes	☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below	you are claiming exempti	on from income tax	under a U.S. income							
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) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye	, , ,	ount of exe					
	(a) Total Catanthia and 1	- Farms 1040 ND 15 41 D		ave also an E 4							
•	(e) Total. Enter this amount of		-			Yes	□ No				
	Were you subject to tax in a fo					= -	⊔ No ⊠ No				
3.	Are you claiming treaty benefit "Yos," attach a copy of the					∐ Yes	△ NO				
М	If "Yes," attach a copy of the C Check the applicable box if:	Joinpetent Authority detern	illiation letter to you	ı returri.							
	This is the first year you are many with a U.S. trade or business u										
2	You have made an election in	` ,									
۷.	States as effectively connected										