Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

T.....

| Тахрау | ver's name | Social secu | Social security number 608-93-6222 | | | | | |
|--------|--|---------------|---------------------------------------|------------|--|--|--|--|
| LIP | PIKA BHARAT PAREKH | 608-93 | | | | | | |
| Spouse | e's name | Spouse's so | Spouse's social security number | | | | | |
| Par | t I Tax Return Information – Tax Year Ending December 31, 2023 (E | nter year you | are aut | horizing.) | | | | |
| 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 | 67,269. | | | | |
| 2 | Total tax | | 2 | 7,061. | | | | |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 11,250. | | | | |
| 4 | Amount you want refunded to you | | 4 | 4,189. | | | | |
| 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.

Taxpaver's PIN: check one box only

| X | I authorize | GLOBAL | TAXES | LLC | | to enter or ge | nerate | mv F | dini L | 3 6 | 22 | 2 2 | 200 | my |
|----------|--------------|---------------|-------------|--------------------|---|-----------------|----------|--------|--------|-----------|---------|-------|-----|------|
| | 1 dutrion20 | | | ERO firm name | | to criter or ge | morato | iiiy i | E | Inter fiv | | | us | iiiy |
| | signature or | 1 the incom | ie tax reti | | mended) I am now | authorizing. | | | C | lon't en | ter all | zeros | | |
| | | | | | me tax return (origi rn is filed using the | | | | | • | | | | - |
| Your sig | nature 🕨 | | | | | Da | ate 🕨 _ | | | | | | | |
| Spouse | 's PIN: chec | k one box | only | | | | | | Г | | | | 1 | |
| | l authorize | | | | | to enter or ge | enerate | my F | PIN | | | | as | my |
| | | | | ERO firm name | | . O | | , | | Inter fiv | | | | 5 |
| | signature o | n the incom | ie tax reti | urn (original or a | mended) I am now | authorizing. | | | c | lon't en | ter all | zeros | | |
| | | | | | me tax return (origi rn is filed using the | | | | | • | | | | - |
| Spouse' | 's signature | • | | | | Da | ate 🕨 | | | | | | | |
| | | | Prac | ctitioner PIN N | lethod Returns 0 | nly—continue | below | | | | | | | |
| Part III | Certific | ation and | J Auther | ntication – Pr | ractitioner PIN N | lethod Only | | | | | | | | |
| ERO's E | EFIN/PIN. Er | iter your siv | <-digit EF | IN followed by y | our five-digit self-s | elected PIN. | 2 2 | 2 | 4 9 | 6 (|) 8 | 2 | 7 1 | |
| | | | | | | Don't e | nter 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 🕨 | |
|---|--------|---------------------------------|
| ERC Don't Subm | | |
| For Denergy ork Deduction Act Nation and your | | Eorm 8870 (Boy, 01 2021) |

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

| 1040 |)- | VR Department of the Treasury-Inter U.S. Nonresident Al | rnal Revenu ien Inc | e Service ome Tax Return | 2023 | OMB No. 1 | 545-0074 | or stap | Only-Do not write ple in this space. |
|--|--|--|------------------------------|---|--|---|-------------|----------------------------------|---|
| For the year Jan | າ. 1– | Dec. 31, 2023, or other tax year beginr | ning | , 2023, 0 | ending | | 20 | | ee separate structions. |
| Your first name | and | middle initial | Last nar | ne | | Your identifying number see instructions) | | | |
| LIPIKA BH | IAR | АТ | PAREKH 60 | | | | | | 5222 |
| Home address (| (nun | ber and street). If you have a P.O. box | , see insti | ructions. | | | | | Apt. no. |
| 444 WASHI | | | | | | | | | 6246 |
| City, town, or po | ost o | ffice. If you have a foreign address, al | so comple | ete spaces below. | | State | | ZIP co | de |
| JERSEY CI | | | 1 | | | NJ | | 0731 | _ 0 |
| Foreign country | nar | le | Foreign | province/state/county | | Foreign | postal c | ode | |
| Filing Status Check only one box. | Single Married filing separately (MFS) Qualifying surviving spouse (QSS) If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent | | | | | | | - | Trust |
| Digital Assets | At oth | any time during 2023, did you: (a) rece erwise dispose of a digital asset (or a | ive (as a re financial ir | eward, award, or payment nterest in a digital asset) | ent for property or ? (See instruction: | services); c s.) | or (b) sell | exchar | nge, or Yes 🔀 No |
| Dependents | | | | | | (4) Cł | eck the b | ox if quali | fies for (see inst.): |
| (see instructions): | | (1) First name Last name | | (2) Dependent's identifying number | (3) Relationship to | vou Ch | ild tax cre | edit Credit for other dependents | |
| | | | | , 0 | (0) | <i></i> | | | |
| If more than four | | | | | | | | | |
| dependents, see instructions and | | | | | | | | | |
| check here | | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, box | k 1 (see in | structions) | | | . 1a | 3 | 67,133. |
| Effectively | b | Household employee wages not rep | orted on l | =orm(s) W-2.... | | | . 11 |) | |
| Connected | С | Tip income not reported on line 1a (| | | | | | > | |
| With U.S. | d | Medicaid waiver payments not repo | | | | | | | |
| Trade oreTaxable dependent care benefits from Form 2441, line 26 | | | | | | | | | |
| Business | f | | | | | | | | |
| Attach | g b | Wages from Form 8919, line 6 | | | | | · 19 | | |
| Form(s) W-2, | h i | Other earned income (see instructions) . | | | | | | | |
| 1042-S, SSA-1042-S, | j | Reserved for future use | | | | | . 1 | : | |
| RRB-1042-S, and 8288-A here, Also | , k | Total income exempt by a treaty from line 1(e) | m Schedu | le OI (Form 1040-NR), it | em L, | | | | |
| attach | z | Add lines 1a through 1h | | | | | . 1: | z | 67,133. |
| Form(s) 1099-R if | 2a | Tax-exempt interest 2a | a | b Tax | able interest | | . 21 |) | 136. |
| tax was | 3a | Qualified dividends 3 | a | b Ord | inary dividends . | | . 31 | > | |
| withheld. | 4a | IRA distributions 4a | a | b Tax | able amount | | . 41 | > | |
| If you did not | 5a | Pensions and annuities 5a | | | able amount | | | - | |
| get a Form W-2, see | 6 | Reserved for future use | | | | | | | |
| instructions. | 7 | Capital gain or (loss). Attach Schedu | | | | | | | |
| | 8 | Additional income from Schedule 1 (Form 1040), line 10 | | | | | | | |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income | | | | | | | 67,269. |
| | 10 | Adjustments to income from Sched | . 10 |) | | | | | |
| | 11 | Subtract line 10 from line 9. This is y | | | | | | I | 67,269. |
| | 12 | Itemized deductions (from Schedu deduction (see instructions) | | | . Std Dedn US | | | 2 | 13,850. |
| | 13a | Qualified business income deductio | | | | | | | |
| | b | Exemptions for estates and trusts o | 5 (| , | | | | | |
| | c | Add lines 13a and 13b | | | | | | | 10 0 |
| | 14 | | | | | | | | 13,850. |
| | <u>15</u> | Subtract line 14 from line 11. If zero | | | | | . 1 | | 53,419. |

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

Form **1040-NR** (2023)

| Form 1040-NR (2 | 2023) | | Page 2 |
|--------------------------------------|---------------|--|----------------------------|
| Tax and | 16 | Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 | 16 7,061. |
| Credits | 17 | Amount from Schedule 2 (Form 1040), line 3 | 17 0. |
| | 18 | Add lines 16 and 17 | 18 7,061. |
| | 19 | Child tax credit or credit for other dependents from Schedule 8812 (Form 1040) | 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, enter -0 | 22 7,061. |
| | 23a | Tax on income not effectively connected with a U.S. trade or business from | |
| | | Schedule NEC (Form 1040-NR), line 15 | |
| | b | Other taxes, including self-employment tax, from Schedule 2 (Form 1040), | |
| | | line 21 | |
| | С | Transportation tax (see instructions) | |
| | d | Add lines 23a through 23c | 23d |
| | 24 | Add lines 22 and 23d. This is your total tax | 24 7,061. |
| Payments | 25 | Federal income tax withheld from: | |
| | а | Form(s) W-2 | |
| | b | Form(s) 1099 | |
| | С | Other forms (see instructions) | |
| | d | Add lines 25a through 25c | 25d 11,250. |
| | е | Form(s) 8805 | 25e |
| | f | Form(s) 8288-A | 25f |
| | g | Form(s) 1042-S | 25g |
| | 26 | 2023 estimated tax payments and amount applied from 2022 return | 26 |
| | 27 | Reserved for future use . | |
| | 28 | Additional child tax credit from Schedule 8812 (Form 1040) 28 | |
| | 29 | Credit for amount paid with Form 1040-C | |
| | 30 | Reserved for future use . | |
| | 31 | Amount from Schedule 3 (Form 1040), line 15 | |
| | 32 | Add lines 28, 29, and 31. These are your total other payments and refundable credits | 32 |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments | 33 11,250. |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | 34 4,189. |
| | 35a | Amount of line 34 you want refunded to you . If Form 8888 is attached, check here | 35a 4,189. |
| Direct deposit? See instructions. | b | Routing number 0 2 1 0 0 0 2 1 c Type: C Checking Savings | |
| See instructions. | d | Account number 7 6 3 0 5 6 3 1 1 | |
| | е | If you want your refund check mailed to an address outside the United States not shown on page 1, | |
| | | enter it here Amount of line 34 you want applied to your 2024 estimated tax 36 | |
| | 36 | | |
| Amount | 37 | Subtract line 33 from line 24. This is the amount you owe . | |
| You Owe | 0 0 | For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions | 37 |
| | 38 | Estimated tax penalty (see instructions) | |
| Third | , | bu want to allow another person to discuss this return with the IRS? See instructions. Yes. Comp | |
| Party Designee | Desig name | | ication |
| Designee | | penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the | |
| | | they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which | |
| Sign | Your | signature Date Your occupation If th | e IRS sent you an Identity |
| Here | Tour | | tection PIN, enter it here |
| | | MANAGEMENT CONSULTANT (see | e inst.) |
| _ | Phone | e no. Email address | |
| Paid | Prepa | rrer's name Preparer's signature Date PTIN | Check if: |
| Preparer | SYAM | 1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/26/2024 P0208 | 2703 Self-employed |
| Use Only | Firm's | s name GLOBAL TAXES LLC Phone r | . (678) 965-9522 |
| | Firm's | s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E | IN |
| Go to www.irs.g | gov/Foi | rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO | Form 1040-NR (2023) |

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

Attachment Sequence No. 7B

2

LIPIKA BHARAT PAREKH

Your identifying number

608-93-6222

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

| | Nature of Income | | (a) 10% | (b) 150/ | (-) 200/ | (d) Other | r (specify) | | |
|--|---|--|----------------|-----------------|-----------------------------|---------------------|-------------------------|--|--|
| | | Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | % | % |
| 1 | Dividends and divide | end equivalents: | | | | | | | |
| а | Dividends paid by U | .S. corporations | | 1a | | | | | |
| b | Dividends paid by fo | s paid by U.S. corporations | | | | | | | |
| с | Dividend equivalent p | idends and dividend equivalents: idends paid by U.S. corporations idends paid by foreign corporations idend equivalent payments received with respect to section 871(m) transaction arest: rtgage | | 1c | | | | | |
| 2 | Interest: | | | | | | | | |
| а | Mortgage | | | 2a | | | | | |
| b | Paid by foreign corp | orations | [| 2b | | | | | |
| с | | | F | 2c | | | | | |
| 3 | | | F | 3 | | | | | |
| 4 | • | | - | 4 | | | | | |
| 5 | | | 5 | | | | | | |
| 6 | | | F | 6 | | | | | |
| 7 | | • | H H | 7 | | | | | |
| 8 | | | 8 | | | | | | |
| 9 | Capital gain from line 18 below | | | | | | | | |
| 10 | | | | | | | | | |
| а | | | | | | | | | |
| b | Losses | | | 10c | | | | | |
| 11 | Gambling-Resident | ts of countries other than Canada. s 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 r | rate of tax at top of each column | | 14 | | | | | |
| 15 | Tax on income not e | | | | | | | -NR, line 23a 15 | |
| | | Capital Gains and | Losses Fi | rom | Sales or Excha | nges 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 | | (if necessary, attach statement of 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. | | | | | | | | |
| or loss | on disposing of a U.S. real | | | | | | | | |
| gains a | y interest; report these nd losses on Schedule D | | | | | | | | |
| (Form 1 | | | | | | | | | |
| | property sales or ges that are effectively | | | | | | | | |
| connec | ted with a U.S. business edule D (Form 1040), | | | | | | | N / | |
| | 797, or both. | 18 Capital gain. Combine columns (f) and (g) |) of line 17. | Ente | r the net gain her | e and on line 9 abo | ove. If a loss, ente | er-0 18 | |
| For Pa | perwork Reduction A | ct Notice. see the Instructions for Form 1040-NR. | | | BAA REV 0 |)3/07/24 PRO | | Schedule NEC | (Form 1040-NR) 2023 |

| SCHE | DUI | _E | OI |
|-------|------|-----|----|
| (Form | 1040 |)-N | R) |

Athar Information

| SCHEDULE OI | | | Othe | r Informatio | n | L | OMB No. 15 | 45-0074 |
|-------------|--|--------------------|--|--------------------------|--|-------------|--------------------------------|-------------|
| (Form | 1040-NR) | | | 202 | | | | |
| | ent of the Treasury Revenue Service | Go t | • | Attachment Sequence N | | | | |
| | hown on Form 1040 | -NR | Your identifyi | - | 0.70 | | | |
| LIPI | KA BHARAT | PAREKH | | | | 608-93- | 6222 | |
| Α | Of what countr | y or countries v | vere you a citizen or nation | al during the tax ye | ar? INDIA | | | |
| В | In what country | / did you claim | residence for tax purpose | s during the tax ye | ar? United States | | | |
| С | Have you ever | applied to be a | green card holder (lawful p | permanent resident) | of the United States? . | | 🗌 Yes | 🛛 No |
| D | Were you ever: | | | | | | | |
| | A U.S. citizen? | | | | | | Yes | 🛛 No |
| 2. | • | • • | rmanent resident) of the Ur | | | | Ves | 🔀 No |
| | - | |), see Pub. 519, chapter 4, | | | | | |
| E | immigration sta | tus on the last of | day of the tax year, enter y day of the tax year. <u>F1</u> | | | | | |
| F | Have you ever | changed your \ | visa type (nonimmigrant sta e the date and nature of th | tus) or U.S. immigr | ation status? | | Yes | 🗙 No |
| G | List all dates yo | ou entered and | left the United States durin | g 2023. See instruc | tions. | | | |
| | | | anada or Mexico AND cor | | | _ | | |
| | check the box | for Canada o | Mexico and skip to item I | | | |) | |
| | | United States | Date departed United Stat | es | Date entered United State | s Date de | eparted Unite | d States |
| | mm/ | dd/yy | mm/dd/yy | | mm/dd/yy | | mm/dd/yy | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| н | | | vacation, nonworkdays, and | | | | : | |
| I | Did you file a U | .S. income tax | return for any prior year? . | | | | | 🗌 No |
| J | Are you filing a | roturn for a tru | nd form number you filed: st?............. | L | .040NR | | Yes | 🗙 No |
| J | | | U.S. or foreign owner unde | | | | | |
| | | | ribution from a U.S. person | | | | | No |
| К | • | | ation of \$250,000 or more | | | | | × No |
| | - | | ative method to determine | | | | | |
| L | Income Exemp | t From Tax-If | f you are claiming exempt v. See Pub. 901 for more in | ion from income ta | ax under a U.S. income | | | ı country, |
| 1. | | | the applicable tax treaty and the columns below. Attach For | | | claimed the | treaty benef | it, and the |
| | | (a) Cou | ntry | (b) Tax treaty artic | le (c) Number of month claimed in prior tax ye | | Amount of ex e in current t | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | (e) Total. Ente | r this amount o | n Form 1040-NR, line 1k. D |)o not enter it anyw | here else on line 1 | | | |
| 2. | Were you subje | ect to tax in a fo | preign country on any of the | e income shown in | 1(d) above? | | 🗌 Yes | 🗌 No |
| 3. | Are you claimin | g treaty benefit | ts pursuant to a Competent | t Authority determir | nation? | | 🗌 Yes | 🗙 No |
| | If "Yes," attach | a copy of the 0 | Competent Authority deterr | mination letter to yo | ur return. | | | |
| М | Check the appl | icable box if: | | | | | | |

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

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

BAA

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

REV 03/07/24 PRO Schedule OI (Form 1040-NR) 2023