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

	1				
Submi	ssion Identification Number (SID)				
Taxpaye	or's name	Social securi	ty numb	per	
MAZI	EED MOHAMMAD	662-49-3669			
Spouse'	s name	Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r vear vou a	re au	thorizina	1
	whole dollars only on lines 1 through 5.	ycai you c	iic au	u ionzing.	·)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	16	,182.
2	Total tax		2		333.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	,417.
4	Amount you want refunded to you		4		,084.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by the income tax return (original or amended by by by the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmand my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely 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 interval of the	ve are the am litter, or electrection of the tale. S. Treasury a licated in the tale to debit the ethe authorize uests must be processing opayment. I fur	ounts fonic reformers, reforming the control of the	rom the incurrence transfer of the transfer of transfer of the transfer of tra	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		my PINI 9	3 6	6 6 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 ▶				
Snous	e's PIN: check one box only				
Орошо	I authorize to enter or generate	my PIN			as my
	ERO firm name		ter five	digits, but	asiny
	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	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7	8 6	1 9 8	9
		Don't en	er all Ze	108	
authori	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 e-file Providers of I	nitting this ret	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 IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent one box. Your identifying number Your first name and middle initial Last name (see instructions) MAZEED 662-49-3669 MOHAMMAD Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual UNIT 4 Estate or Trust 27 LONGWOOD AVE City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code BROOKLINE 02446 Foreign country name Foreign province/state/county Foreign postal code At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes X No

Dependents								(4) ✓ if qualifies for (see inst.):		
(see instructions):		(1) First name	Last name	(2) Dependent's identifying number	(3) Depe		Child ta	x credit	Credit for other dependents	
16 11 6										
If more than four dependents, see										
instructions and										
check here ►										
Income	1a	Wages, salaries, tips	, etc. Attach Form(s) W	<i>l</i> -2				1a	16,182.	
Effectively	b	Scholarship and fello	wship grants. Attach F	Form(s) 1042-S or require	d statement.	See instruc	tions .	1b		
Connected	С	Total income exemp	t by a treaty from Sch	edule OI (Form 1040-NR	R), Item					
With U.S.		L, line 1(e)			1c					
Trade or	2a	Tax-exempt interest	2a	b Tax	xable interest			2b		
Business	3a	Qualified dividends	3a	b Ord	dinary divider	nds		3b		
	4a	IRA distributions .	4a	b Tax	xable amount			4b		
	5a	Pensions and annuiti	es 5a	b Tax	xable amount			5b		
	6	Reserved for future use								
	7	Capital gain or (loss)	. Attach Schedule D (Fe	orm 1040) if required. If n	ot required, o	heck here	. ▶ 🗌	7		
	8	Other income from S	chedule 1 (Form 1040)	, line 10				8		
	9	Add lines 1a, 1b, 2b,	3b, 4b, 5b, 7, and 8. T	his is your total effective	ely connecte	d income	▶	9	16,182.	
	10	Adjustments to incor	ne:							
	а	,				ı				
	b	Reserved for future u	ıse		10k					
	С	Scholarship and fello	wship grants excluded	1	100	;				
	d	Add lines 10a and 10	c. These are your tota	I adjustments to income	е		. •	10d		
	11	Subtract line 10d from	m line 9. This is your a	djusted gross income			▶	11	16,182.	
	12a			Form 1040-NR)) or, for						
		residents of India, st	andard deduction. See	instructions Std Dedn US/Ind		_	2 , 550.			
	b	Charitable contribution	ons for certain resident	s of India. See instruction	s . 12 k)	300.			
	С	Add lines 12a and 12						12c	12,850.	
	13a			Form 8995 or Form 8995						
	b	Exemptions for estat	es and trusts only. See	e instructions	13k)				
	С	Add lines 13a and 13						13c		
	14	Add lines 12c and 13						14	12,850.	
	15	Taxable income. Su	btract line 14 from line	11. If zero or less, enter	-0			15	3,332.	

BAA

	16	Tax (see instructions). Check if any from Form(s	s): 1 🗌 8814 2 🗌 4972	2 3 🗌		16	333.
	17	Amount from Schedule 2 (Form 1040), line 3.				17	0.
	18	Add lines 16 and 17				18	333.
	19	Nonrefundable child tax credit or credit for otl				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, e				22	333.
	23a	Tax on income not effectively connected w from Schedule NEC (Form 1040-NR), line 15.	ith a U.S. trade or business	23a			333.
	b	Other taxes, including self-employment tax, filine 21	rom Schedule 2 (Form 1040),	23b			
	C	Transportation tax (see instructions)	•	23c		00-1	
	d	Add lines 23a through 23c				23d	222
	24	Add lines 22 and 23d. This is your total tax .				24	333.
	25	Federal income tax withheld from:					
	а	Form(s) W-2			, 417.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c				25d	1,417.
	е	Form(s) 8805				25e	
	f	Form(s) 8288-A				25f	
	g	Form(s) 1042-S				25g	
	26	2021 estimated tax payments and amount ap	plied from 2020 return			26	
	27	Reserved for future use		27			
	28	Refundable child tax credit or additional ch 8812 (Form 1040)	ild tax credit from Schedule	28			
	29	Credit for amount paid with Form 1040-C .		29			
	30	Reserved for future use		30			
	31	Amount from Schedule 3 (Form 1040), line 15		31			
	32	Add lines 28, 29, and 31. These are your total	•		. ▶	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These				33	1,417.
Refund	34	If line 33 is more than line 24, subtract line 24				34	1,084.
iteraria	35a	Amount of line 34 you want refunded to you.		•	_	35a	1,084.
Direct deposit?	b b	Routing number 0 1 1 0 0 0 1	Savings	SSa	1,004.		
See instructions.		Account number 4 6 6 0 0 6 0	Savings				
	▶ d						
	▶ e	If you want your refund check mailed to an accenter it here.					
	36	Amount of line 34 you want applied to your 2	2022 estimated tax .	36			
Amount	37	Amount you owe. Subtract line 33 from line 2		ee instructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions)		38			
Third Party Designee		ou want to allow another person to dis structions	cuss this return with the II		omplete b	elow.	⊠ No
	Desig name		Phone no. ►		al identific er (PIN)	ation [
Sign		penalties of perjury, I declare that I have examined the they are true, correct, and complete. Declaration of programme per person of person					
Here	Your signature Date Your occupation						nt you an Identity
						_	IN, enter it here
	<u> </u>		RESEARCH F	ELLOW	(see ir	nst.) ▶	
	Phone		Email address				
Paid	Prepa	rer's name Preparer's sign	nature	Date	PTIN		Check if:
	SYAM F	RIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR GUPTA TALLAM	04/15/2022	P02082	703	Self-employed
Preparer							8)965-9522
Use Only	Firm's	address ► 2530 Pebble Creek Lr		EIN ► 30-1017196			

Form 1040-NR (2021)

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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 (99) ▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

202	1
Attachment Sequence No.	7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number MAZEED MOHAMMAD 662-49-3669

LITTE	inioditi of income and	er the appropriate rate of tax. See instructions.						(d) Other	(specify)
	Nature of Income			(a) 10%		(b) 15%	(c) 30%	%	%
1	Dividends and divide	nd equivalents:						70	70
а	Dividends paid by U.	·		1a					
b		reign corporations	- +	1b					
C		ayments received with respect to section 871(m) transa	- F	1c					
2	Interest:		Ī						
а	Mortgage			2a					
b		orations		2b					
С				2c					
3	Industrial royalties (p.	atents, trademarks, etc.)	[3					
4		copyright royalties	r	4					
5	Other royalties (copy	rights, recording, publishing, etc.)	[5					
6	Real property income	e and natural resources royalties	[6					
7		es		7					
8	Social security benef	its	[8					
9				9					
10	• •								
а	140								
b	b Losses			10c					
11	Note: Losses not allo	Residents of countries other than Canada.		11					
12	2 Other (specify) ▶								
				12					
13	_	12 in columns (a) through (d)	- +	13					
14		ate of tax at top of each column		14					
15	Tax on income not ef	fectively connected with a U.S. trade or business. Add						R, line 23a ► 15	
		Capital Gains and Lo	sses F	rom	Sales or Excha	inges of Propert	ty	I	
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			(b) Date acquired 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).
(Form 1	•								
exchan	property sales or ges that are effectively								
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.								()	
		18 Capital gain. Combine columns (f) and (g) of	line 17.	. 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

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

2021 Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040-NR.
► Answer all questions.

Name	shown on Form 1040-NR			Your identifying number						
MA	ZEED MOHAMMAD			662-49-3669						
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:									
	I. A U.S. citizen?				⊠ No					
2	2. A green card holder (lawful permanent resident) of the Ur			⊔ Yes	⊠ No					
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
Ε	If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. F1									
F	Have you ever changed your visa type (nonimmigrant sta	ave you ever changed your visa type (nonimmigrant status) or U.S. immigration status? you answered "Yes," indicate the date and nature of the change ▶								
G	List all dates you entered and left the United States during	ng 2021. See instructio	ns.							
	Note: If you are a resident of Canada or Mexico AND co									
	check the box for Canada or Mexico and skip to item h			Mexico						
	Date entered United States Date departed United State mm/dd/yy mm/dd/yy	tes Da	ate entered United State mm/dd/yy	s Date departed United mm/dd/yy	States					
	mm/dd/yy mm/dd/yy		ППЛаалуу	ППП/аа/уу						
Н	Give number of days (including vacation, nonworkdays, and		•	•						
ı	2019, 2020, Did you file a U.S. income tax return for any prior year? .				□No					
	If "Yes," give the latest year and form number you filed ▶									
J	Are you filing a return for a trust?									
	If "Yes," did the trust have a U.S. or foreign owner under									
	U.S. person, or receive a contribution from a U.S. person				☐ No					
K	Did you receive total compensation of \$250,000 or more				⊠ No					
	If "Yes," did you use an alternative method to determine		•		☐ No					
L	Income Exempt From Tax—If you are claiming exempt complete (1) through (3) below. See Pub. 901 for more in			tax treaty with a foreign	country,					
1	 Enter the name of the country, the applicable tax treaty ar amount of exempt income in the columns below. Attach Fe 		claimed the treaty benefit	, and the						
	(a) Country	(b) Tax treaty article	(c) Number of month claimed in prior tax ye							
	(e) Total. Enter this amount on Form 1040-NR, line 1c. [Do not enter it on line 1	la or line 1b	>						
	2. Were you subject to tax in a foreign country on any of the			Yes	☐ No					
3	3. Are you claiming treaty benefits pursuant to a Competen			🔀 Yes	☐ No					
	If "Yes," attach a copy of the Competent Authority determ	mination letter to your	return.							
М	Check the applicable box if:									
	This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See in	nstructions			▶ □					
2	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin									