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

Submi	ssion Identification Number (SID)		·		
Taxpaye	r's name	Social securi	Social security number		
ABDU	JL REHAMAN SHAIK	870-34-5509			
Spouse'	Spouse's soo	ial secu	ırity numbe	er	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re aut	thorizing	J.)
	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		1 , 991.
2	Total tax		2	-	1 , 955.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	,	2 , 776.
4	Amount you want refunded to you		4		821.
5	Amount you owe		5		
Part	I Taxpayer Declaration and Signature Authorization (Be sure you get and k	еер а сор	y of y	our reti	urn)
return (to send for any Agent t paymer authoriz paymer busines taxes to persona Electron	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) at an acknowledgement of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment of the payme	ter, or electro- ction of the transport of transport of the transport of the transport of transport of the transport of the transport of tr	onic retransmise and its cax preparentry tation. The receivent the electric there accepts the second control of the second control o	turn originasion, (b) to designated paration so this according for the control of	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the
Тахра	yer's PIN: check one box only	4	5 5	5 0 9	
×	I authorize GLOBAL TAXES LLC to enter or generate n ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ny PIN └─ En	ter five	digits, but r all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am no	w authorizi	na. Ch	neck this	box onlv
	if you are entering your own PIN and your return is filed using the Practitioner PIN metholelow.				
Your s	ignature ▶ Date ▶				
Spous	e's PIN: check one box only				1
	I authorize to enter or generate n	nv PIN			as my
	ERO firm name	_	ter five	digits, but] ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part					
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 er all ze	-	7 1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income tax zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Indicated	tting this retu	ırn in a	ccordanc	
FRO'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 beginning,				, 2023,	, 2023, ending, 20			See separate instructions.	
Your first name and middle initial			Last name				Your ide	Your identifying number	
							(see instructions)		
ABDUL REHAMAN				K			870-34-5509		
Home address (number and street). If you have a P.O. box, see instructions.						•	Apt. no.		
14019 BAF	KLE	Y STREET						704	
City, town, or p	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code	
OVERLAND	PAR	K				KS		66223	
Foreign country name Foreign province/state/county Foreign p						oostal co	de		
Filing							☐ Fst	tate 🔲 Trust	
Status	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende								
Check only	"	,				,			
one box.									
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f					r (b) sell, (
Danandanta	-	with a coor (or a signal accor (or a r	- Indirioral	micordor in a digital addo				c if qualifies for (see inst.):	
Dependents (see instructions):				(2) Dependent's		1		Cradit for other	
(See Instructions).		(1) First name Last name		identifying number	(3) Relationship to yo	ou Chii	d tax credi	dependents	
If more than four									
dependents, see									
instructions and							Ц		
check here									
Income	1a	Total amount from Form(s) W-2, box	,	,				31,991.	
Effectively	b	Household employee wages not rep							
Connected	C	Tip income not reported on line 1a (s		•					
With U.S.	d	Medicaid waiver payments not report							
Trade or	e	Taxable dependent care benefits fro		•					
Business	f	Employer-provided adoption benefit		•			. 1f		
Attach	g h	Wages from Form 8919, line 6					. 1g		
Form(s) W-2,	- ''	Other earned income (see instruction Reserved for future use	•				. 111		
1042-S, SSA-1042-S.		Reserved for future use					. 1j		
RRB-1042-S,	ı k	Total income exempt by a treaty from			1 1		,		
and 8288-A here. Also	ĸ	line 1(e)							
attach	z	Add lines 1a through 1h					. 1z	31,991.	
Form(s)	2a	Tax-exempt interest 2a	1	1	kable interest		. 2b	, , , , , , , , , , , , , , , , , , , ,	
1099-R if tax was		Qualified dividends 3a			dinary dividends .		. 3b		
withheld.	4a	IRA distributions 4a			kable amount		. 4b		
If you did not	5a	Pensions and annuities 5a	1	b Tax	kable amount		. 5b		
get a Form W-2, see	6	Reserved for future use					. 6		
instructions.	7	Capital gain or (loss). Attach Schedu	,	, ,	•	_			
	8	Additional income from Schedule 1	(Form 10	040), line 10			. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively of	connected income		. 9	31,991.	
	10	Adjustments to income from Sched income	,	,.					
	11	Subtract line 10 from line 9. This is y						31,991.	
	12	Itemized deductions (from Schedu							
		deduction (see instructions)		13,850.					
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts or	nly (see i	nstructions)	13b				
	С	Add lines 13a and 13b					. 13c		
	14	Add lines 12 and 13c					. 14	13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income .	<u>.</u>	. 15	18,141.	

Form 1040-NR (2	2023)									Page 2
Tax and	16	Tax (see instructions). Check if any	from For	rm(s): 1	314 2 [4972	3 🗌		16	1,955.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3					17	0.
	18	Add lines 16 and 17								1,955.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)								
	20	Amount from Schedule 3 (Form 1040), line 8								
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zer	o or less	s, enter -0					22	1,955.
	23a	Tax on income not effectively conr	nected w	rith a U.S. trade o	or business f	from				
		Schedule NEC (Form 1040-NR), lin	ne 15 .			. 4	23a			
	b	Other taxes, including self-employ	ment ta	x, from Schedule	e 2 (Form 10	040),				
		line 21				. 2	23b			
	С	Transportation tax (see instruction	ıs)			. 2	23c			
	d	Add lines 23a through 23c							23d	
-	24	Add lines 22 and 23d. This is your	total ta	x					24	1,955.
Payments	25	Federal income tax withheld from:								
	а	Form(s) W-2				. 2	25a	2,776.		
	b	Form(s) 1099				. 2	25b			
	С	Other forms (see instructions) .				. 2	25c			
	d	Add lines 25a through 25c							25d	2,776.
	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 20	22 return .		. <u>.</u>		26	
	27	Reserved for future use					27			
	28	Additional child tax credit from Sc	hedule 8	8812 (Form 1040)			28			
	29	Credit for amount paid with Form	1040-C				29			
	30	Reserved for future use					30			
	31	Amount from Schedule 3 (Form 10	040), line	15			31			
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments								2,776.
Refund	34	If line 33 is more than line 24, subt	ract line	24 from line 33.	This is the a	amount <u>y</u>	you overpai	d	34	821.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here								821.
Direct deposit?	b	Routing number 1 0 1 1 0 0 0 4 5 c Type: Checking Savings								
See instructions.	d	Account number 5 1 8 0 1 0 7 9 1 0 7 9								
	е	If you want your refund check mailed to an address outside the United States not shown on page 1,								
		enter it here.								
	36	Amount of line 34 you want applied	d to you	ur 2024 estimate	ed tax .		36			
Amount	37	Subtract line 33 from line 24. This		-						
You Owe		For details on how to pay, go to w	•	•		1			37	
	38	Estimated tax penalty (see instruction					38			
Third	Do you want to allow another person to discuss this return with the IRS? See instructions.								ow. 🗵 No	
Party	Designee's Phone Personal identification							ication		
Designee	name nonumber (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and									
		penalties of perjury, I declare that I have they are true, correct, and complete. De								
Sign			olaration				on an imonna			ent you an Identity
Here	Your signature Date Your occupation						PIN, enter it here			
Here							inst.)	,		
İ	Phone	e no.		Email address				,		
Paid			Preparer	's signature		1	Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	RIYA RAM SAGAF	GUPTA TA	LLAM ()2/21/2024	P0208	2703	Self-employed
Preparer							hone no. (678) 965-9522			
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E								4-3171965	

BAA

SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

ABDUL REHAMAN SHAIK

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

Your identifying number

870-34-5509

Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings ______ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13

14

Capital Gains and Losses From Sales or Exchanges of Property

Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a

Enter only the capital gains and losses from property sales or exchanges that are from source 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. reproperty interest; report these gains and losses on Schedule D (Form 1040).

14

15

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). Form 4797, or both.

					3	7		
nd ces not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(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).
J.S.								
in								
real								
e D								
,								
ss	17	Add columns (f) and (g) of line 16 .				17	()	
	18 (Capital gain. Combine columns (f) and	(g) of line 17. Ente	er the net gain here	and on line 9 abo	ove. If a loss, enter	′-0 18	

15

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Name s	hown on Form 1040-NR				Your identifying number					
ABDU	JL REHAMAN SHAIK				870-34-5509					
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 gree	en card holder (lawful p	ermanent resident)	of the United States? .	Yes	⊠ No				
D	Were you ever:		(A-4)							
2.	•	⊔ Yes	⊠ No							
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax yearF1									
F	Have you ever changed your visa if you answered "Yes," indicate the	type (nonimmigrant state date and nature of the	tus) or U.S. immigr e change:	ation status?	∐Yes	⊠ No				
G	List all dates you entered and left t	the United States during	g 2023. See instruc	ctions.						
	Note: If you're a resident of Cana				_					
	check the box for Canada or Me	exico and skip to item F	<u> </u>	🗌 Canada	☐ Mexico					
	1	ate departed United State	es	Date entered United State						
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/yy	′				
			- -							
			<u> </u>							
Н	Give number of days (including vaca	ation nonworkdays and	 I nartial davs) vou w	vere present in the United S	States during:					
••	2021									
I	Did you file a U.S. income tax retu	irn for any prior year?.			Yes	⊠ No				
	If "Yes," give the latest year and for Are you filing a return for a trust?.	orm number you mea.			Yes	⊠ No				
J	If "Yes," did the trust have a U.S.	or foreign owner unde	r the grantor trust	rules, make a distributior	n or loan to a					
V	U.S. person, or receive a contribut	•				□ No ⊠ No				
K	Did you receive total compensatio					□ No				
L	If "Yes," did you use an alternative method to determine the source of this compensation?									
1.	Enter the name of the country, the amount of exempt income in the co	claimed the treaty bene	fit, and the							
	(a) Country		(b) Tax treaty artic							
				Ciamica in prior tax ye	ars moone in current	tax year				
	(e) Total. Enter this amount on Fo	orm 1040-NR, line 1k. D	o not enter it anyw	here else on line 1						
	Were you subject to tax in a foreig				Yes	☐ No				
3.	Are you claiming treaty benefits pu	·	•		Yes	⊠ No				
	If "Yes," attach a copy of the Com	petent Authority detern	nination letter to yo	ur return.						
M	Check the applicable box if:	na an alaatian ta tract :-	oomo from rool	porty located in the Unite	ad States as affactively	oonnooto-l				
	This is the first year you are makin with a U.S. trade or business unde	er section 871(d). See in	structions			🗆				
2.	You have made an election in a p				eal property located in	the United				