### 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

	5				
Submiss	sion Identification Number (SID)				
Taxpayer's	s name	Social securit	y numb	er	
TAUFI	EEQ MALIK	056-11-	-6944		
Spouse's	~	Spouse's soc			r
Part I	Tax Return Information — Tax Year Ending December 31, 2023 (	 Enter year you a	ra aut	horizina	1
,	hole dollars only on lines 1 through 5.	Enter year you a	e aui	nonzing.	)
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1 1	41	,014.
	Fotal tax		2		,041.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,308.
	Amount you want refunded to you		4		,267.
_ 5 <i>A</i>	Amount you owe		5		
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a cop	y of y	our retu	rn)
my know return (or to send r for any d Agent to payment authoriza payment business taxes to personal	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amenulated and belief, it is true, correct, and complete. I further declare that the amounts in Part riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, to my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason felay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accourage of my federal 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 term, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation days prior to the payment (settlement) date. I also authorize the financial institutions involved receive confidential information necessary to answer inquiries and resolve issues related to identification number (PIN) below is my signature for the income tax return (original or amende	I above are the amoransmitter, or electro or rejection of the transmitter. The U.S. Treasury and indicated in the tastitution to debit the minate the authorizan requests must be in the processing of the payment. I furt	ounts from the counts of the c	om the in- urn origina sion, (b) the esignated aration soft to this according revoke ( ed no late extronic pa	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the
	c Funds Withdrawal Consent.  er's PIN: check one box only				
X	I authorize GLOBAL TAXES LLC to enter or gene	rata my BINI	6 9	4 4	ac my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		ligits, but all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.				
Your sig	gnature ▶ Date	e <b>&gt;</b>			
Snouse	e's PIN: check one box only				
	I authorize to enter or gene	erate my PIN			as my
	ERO firm name	-	er five o	ligits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	doı	n't ente	all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.				
Spouse	's signature ► Date	<b>.</b>			
	Practitioner PIN Method Returns Only—continue b	elow			
Part III	Certification and Authentication — Practitioner PIN Method Only				
ERO's I	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9 Don't ente	6 0 erallze	8 2 7 ros	1
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual incomed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amplents of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Provider	submitting this retu	rn in a	ccordance	
ERO's s	signature ► Date	e <b>&gt;</b>			
	ERO Must Retain This Form — See Instruction				
	Don't Submit This Form to the IRS Unless Requested	To Do So			

# E1040-NR 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 Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	0	See separate instructions.
Your first name	and i	niddle initial	Last na	ame			Your iden	tifying number
							(see instru	ctions)
TAUFEEQ			MALI	K			056-1	1-6944
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
#3024, CA	NNC	N ROAD						
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
TWINSBURG	3		_			ОН	4	4087
Foreign country	nam nam	e	Foreig	n province/state/county		Foreign po	ostal code	
	1							
Filing		Single	arately (N	∕IFS) ☐ Qualifvi	ng surviving spouse (0	OSS)	☐ Estat	e 🗌 Trust
Status		you checked the QSS box, enter the		· · · · · · · · · · · · · · · · · · ·	0 0	,		
Check only		, ,			,			
one box.			. ,			. ,		
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a					(b) sell, exc	
Dependents	+	oo dioposo o. a digital doos (c. a :						qualifies for (see inst.):
(see instructions)				(2) Dependent's			tax credit	Credit for other
If more than fou		(1) First name Last name		identifying number	(3) Relationship to you	ı Cillia		dependents
If more than four							Ц	
dependents, see							<u> </u>	
instructions and								
check here							Ц	
Income	1a	Total amount from Form(s) W-2, box	`	,			1a	40,774.
Effectively	b	Household employee wages not rep		` '			1b	
Connected	C	Tip income not reported on line 1a (		•			1c	
With U.S.	d	Medicaid waiver payments not repo		` ' '	,		1d	
Trade or	e	Taxable dependent care benefits fro		•			1e	
Business	f	Employer-provided adoption benefit Wages from Form 8919, line 6		•			1f	
Attach	g h	Other earned income (see instruction					1g 1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	,					
SSA-1042-S,	i	Reserved for future use					1j	
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		-,	
and 8288-A here. Also		line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	40,774.
Form(s)	2a	Tax-exempt interest 2a	1	1	kable interest		2b	•
1099-R if tax was	За	Qualified dividends 3	а	<b>b</b> Ord	dinary dividends		3b	
withheld.	4a	IRA distributions 4a		<b>b</b> Tax	kable amount		4b	
If you did not	5a	Pensions and annuities 5a	a	<b>b</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	ule D (Fo	rm 1040) if required. If n	ot required, check her	e 🗆	7	
	8	Additional income from Schedule 1	(Form 10	040), line 10			8	240.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your <b>total effectively</b> of	onnected income .		9	41,014.
	10	Adjustments to income from Schedincome	•		•		10	
	11	Subtract line 10 from line 9. This is y	our <b>adj</b> u	usted gross income			11	41,014.
	12	Itemized deductions (from Schedu						
		deduction (see instructions)			l l	ndia Trea	ty <b>12</b>	13,850.
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995	-A . <b>13a</b>			
	b	Exemptions for estates and trusts o	nly (see i	instructions)	13b			
	С	Add lines 13a and 13b					13c	
	14							13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b>	xable income		15	27 <b>,</b> 164.

Form 1040-NR (	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	y from For	rm(s): <b>1</b>	814 <b>2</b> [	497	2 <b>3</b>			16	3,041.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17	18	3,041.							
	19	Child tax credit or credit for other	r depende	ents from Sched	dule 8812 (Fo	orm 10	40) .			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	3,041.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business	from					
		Schedule NEC (Form 1040-NR),	line 15 .				23a				
	b	Other taxes, including self-emple	oyment ta	x, from Schedu	le 2 (Form 1	040),					
		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 you	ur <b>total ta</b> :	x						24	3,041.
<b>Payments</b>	25	Federal income tax withheld from	n:								
	а	Form(s) W-2					25a	ļ	5 <b>,</b> 236.		
	b	Form(s) 1099					25b		72.		
	С	Other forms (see instructions) .					25c				
	d	Add lines 25a through 25c								25d	5,308.
	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 2	022 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from S	Schedule 8	812 (Form 1040	0)		28				
	29	Credit for amount paid with Forn					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form					31				
	32	Add lines 28, 29, and 31. These								32	_
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your t	otal payme	nts .				33	5,308.
Refund	34	If line 33 is more than line 24, su					-	-		34	2,267.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here								35a	2,267.
Direct deposit?	b	Routing number 0 7 1 0			<b>c</b> Type	: 📈	Checking	9 <sub>,</sub> L	Savings		
See instructions.	d	Account number 7 9 0 8 2 6 9 0 0									
	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 app				•	36				
Amount	37	Subtract line 33 from line 24. The		-							
You Owe		For details on how to pay, go to	_	-						37	
	38										
Third	,	u want to allow another person to	discuss t	his return with t	he IRS? See	instruc	ctions.		es. Comp		low. 🛛 <b>No</b>
Party	Desig			Phone	e				nal identif	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									
		penalties of perjury, I declare that I hat they are true, correct, and complete. I									
Sign	,	signature		Date	Your occu	,					ent you an Identity
Here	Tour	signature		Date	Tour occu	apation			I .		PIN, enter it here
11016					INVENTO	RY CC	NTROL	ANALY		inst.)	
	Phone	e no.		Email address							
Paid	Prepa	rer's name	Preparer*	's signature			Date		PTIN		Check if:
	SYAM	I PRIYA RAM SAGAR GUPTA	SYAM I	PRIYA RAM	SAGAR G	UPTA	03/26/	2024	P02082	<u>27</u> 03	Self-employed
Preparer Use Only	Firm's	name GLOBAL TAXES	LLC						Phone n	<b>o</b> . (6	78) 965-9522
Use Only	Firm's	address 245 ROONEY C		RUNSWICK N	J 08816				Firm's E		

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

TAUFEEQ MALIK

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

١.		Sequence No. <b>01</b>
	Your soc	ial security number
	056-11	-6944

Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes				1	
2a	Alimony received		2a			
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. Att	ach S	Schedule	Ε.	5	
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				
h	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:					
	Other Income from box 3 of 1099-Misc 240.	8z		240.		
9	Total other income. Add lines 8a through 8z				9	240.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente					
	1040. 1040-SR. or 1040-NR. line 8				10	240.

Schedule 1 (Form 1040) 2023 Page **2** 

Par	t II Adjustments to Income		
11	Educator expenses	. 11	
12	Certain business expenses of reservists, performing artists, and fee-basis government	nent	
	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		
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings		
19a	Alimony paid		a
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
_	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
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		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
Z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10	. 26	

#### **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 TAUFEEQ MALIK 056-11-6944 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)				
		Nature of income			(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by fo	reign corporations	[	1b					
С		ayments received with respect to section 871(m) tra		1c					
2	Interest:	•	Ī						
а	Mortgage			2a					
b		orations	T T	2b					
С			T T	2c					
3		atents, trademarks, etc.)		3					
4	• "	copyright royalties		4					
5	•	rights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7		, es		7					
8	Social security benefits			8					
9				9					
10		s of Canada only. Enter net income in column (c).							
а	Winnings								
b	Losses			10c					
11	Gambling—Resident Note: Enter winnings	s of countries other than Canada.	İ	11					
12		·							
				12					
13		12 in columns (a) through (d)		13					
14	Multiply line 13 by r	ate of tax at top of each column		14					
15	Tax on income not et	fectively connected with a U.S. trade or business	<b>s.</b> Add columi	าร (a) t	hrough (d) of line 14	1. Enter the total here	and on Form 1040	-NR, line 23a <b>15</b>	
		Capital Gains and	l Losses F	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		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).
	rely connected with a U.S. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
gains a	ty interest; report these nd losses on Schedule D								
(Form 1	•								
	property sales or ges that are effectively								
connec	eted with a U.S. business edule D (Form 1040),								
	1797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17.	. Ente	r the net gain here	e and on line 9 abo	ove. If a loss, ente	er -0 <b>18</b>	

# SCHEDULE OI (Form 1040-NR)

#### **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

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

	snown on Form 1040-NR				Your identifying number				
	FEEQ MALIK				056-11-69				
Α	Of what country or countries were you	a citizen or national	during the tax ye	ear? INDIA					
В	In what country did you claim residence	ce for tax purposes	during the tax ye	ear? United States		- <u></u>	<u></u>		
С	Have you ever applied to be a green ca	ard holder (lawful pe	rmanent residen	t) of the United States? .		☐ Yes	⊠ No		
D	Were you ever:								
1	A U.S. citizen?					☐ Yes	⊠ No		
2	A green card holder (lawful permanent	resident) of the Unit	ed States? .			☐ Yes	⊠ No		
	If you answer "Yes" to (1) or (2), see Pu	·							
Е	If you had a visa on the last day of the				ter vour U.S.				
	immigration status on the last day of the				-				
F	Have you ever changed your visa type		ıs) or U.S. immia	ration status?		Yes	⊠ No		
-	If you answered "Yes," indicate the date and nature of the change:								
G	List all dates you entered and left the L		·						
_	Note: If you're a resident of Canada o	_			ent intervals				
	check the box for Canada or Mexico				☐ Mexico				
		eparted United States		Date entered United State	$\overline{}$	rtod I Inito	d States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy		nm/dd/yy	u States		
			<del>- </del>	,, , ,					
			<del>- </del>						
			$\dashv$						
			<del>- </del>						
					N - 4				
Н	Give number of days (including vacation 2021 . 20				-				
	2021, 20 Did you file a U.S. income tax return fo	ZZ	, and	365	··	□ v	⊠ No		
ı	If "Vee," give the lettest year and form	or any prior year?.				∐ Yes	△ NO		
	If "Yes," give the latest year and form r	iumber you mea.				□ v	<b>⊠</b> N -		
J	Are you filing a return for a trust?					<b>∐</b> Yes	⊠ No		
	If "Yes," did the trust have a U.S. or for U.S. person, or receive a contribution of	from a LLS porson?	the grantor trust	rules, make a distribution	or loan to a				
						∐ Yes	□No		
K	Did you receive total compensation of					☐ Yes	⊠ No		
	If "Yes," did you use an alternative me					∐ Yes	□No		
L	Income Exempt From Tax—If you are complete (1) through (3) below. See Pu				tax treaty with	a foreign	country,		
1	Enter the name of the country, the appl				claimed the tre	aty benefi	t, and the		
	amount of exempt income in the column								
	(a) Country		(b) Tax treaty arti	cle (c) Number of month claimed in prior tax ye		ount of exe			
				ciaimed in prior tax ye	ars income ii	i current to	ах уваі		
	/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1040 ND 11 41 5		1 1 " 4					
_	(e) Total. Enter this amount on Form 1		•						
2	, ,	-				∐ Yes	∐No		
3	Are you claiming treaty benefits pursua		-			∐ Yes	⊠ No		
	If "Yes," attach a copy of the Compete	ent Authority determine	nation letter to y	our return.					
M .	Check the applicable box if:								
1	This is the first year you are making an						onnected		
	with a U.S. trade or business under se						· ·		
2	You have made an election in a previous								
	States as effectively connected with a	U.S. trade or busine	ss under section	18/1(a). See instructions.			<u>U</u>		