# **IRS e-file Signature Authorization**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Submission Identification Number (SID)

T.....

Тахрау	er's name	Social security number					
AAM	ER S MOHAMMED	183.	183-97-1885				
Spouse	's name	Spouse's social security number					
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year y	ou are	auth	norizing.)		
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	16,240.		
2	Total tax			2	239.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	1,638.		
4	Amount you want refunded to you			4	1,399.		
5	Amount you owe			5	•		

#### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

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.

Taxpayer's	PIN:	check	one	box	only
------------	------	-------	-----	-----	------

l authorize GLOBAL TAXES LLC to enter or generate my PIN

7	1	8	8	5	00 001
	er fiv i't er	as my			

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

X

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date ►							
Practitioner PIN Method Returns Only—continue below								
Part III Certification and Authentication – Practitioner	PIN Method Only							
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-dig	it self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9 Don't enter 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 🕨						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So							
Fee Demonstration Act Notice	a sea constant and the back of the state of the sea		Farm 8870 (Day, 01 0001)				

<b>1040</b>	_	Department of the Treasury-Interna U.S. Nonresident Alie	Il Revenue Service	eturn	2023	OMB No. 1	545-0074		Dnly—Do not write le in this space.
For the year Jan	ı. 1–	Dec. 31, 2023, or other tax year beginnin	g,	2023, er	nding		, 20		e separate structions.
Your first name	and	middle initial	Last name		Your identifying number (see instructions)				
AAMER			MOHAMMED				183	-97-1	885
Home address ( 6554 GLEN		ber and street). If you have a P.O. box, s DNE WAY	see instructions.						Apt. no.
City, town, or po	ost (	ffice. If you have a foreign address, also	complete spaces below			State		ZIP co	de
MASON						ОН		4504	0
Foreign country	oreign country name Foreign province/state/county Foreign postal c								
Filing Status Check only one box.	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende nly								Trust
Digital Assets	At oth	any time during 2023, did you: (a) receive erwise dispose of a digital asset (or a fin	e (as a reward, award, or ancial interest in a digital	paymen l asset)?	t for property or (See instruction)	services); s.)	or (b) sell	exchan	ge, or <b>Yes 🔀 No</b>
Dependents						<b>(4)</b> C	heck the be	ox if qualifi	ies for (see inst.):
(see instructions):		(1) First name Last name	(2) Dependent' identifying numb		(3) Relationship to	you CI	nild tax cre	111T I -	redit for other dependents
					.,				
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box 1						1	16,240.
Effectively	b	Household employee wages not report						>	
Connected	С	Tip income not reported on line 1a (se						>	
With U.S.	d	Medicaid waiver payments not reporte			,				
Trade or	e	Taxable dependent care benefits from							
Business	f	Employer-provided adoption benefits					. 11		
Attach	g L	Wages from Form 8919, line 6					. 10		
Form(s) W-2,	h i	Other earned income (see instructions Reserved for future use	,				. 11	1	
1042-S, SSA-1042-S,	i	Reserved for future use					. 1		
RRB-1042-S, and 8288-A here. Also	, k	Total income exempt by a treaty from line 1(e)							
attach	z	Add lines 1a through 1h			. <b>1k</b>		. 12		16,240.
Form(s)	- 2a	Tax-exempt interest 2a	1		ble interest				
1099-R if tax was	3a	Qualified dividends 3a			ary dividends .			<b>,</b>	
withheld.	4a	IRA distributions 4a		<b>b</b> Taxal	ble amount		. 4ł	<b>)</b>	
If you did not	5a	Pensions and annuities 5a		<b>b</b> Taxal	ble amount		. 5ł	>	
get a Form W-2, see	6	Reserved for future use					. 6		
instructions.	7	Capital gain or (loss). Attach Schedule	D (Form 1040) if require	d. If not	required, check	here			
	8	Additional income from Schedule 1 (F	,.						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8.							16,240.
	10	Adjustments to income from Schedul income	e 1 (Form 1040), line 26. · · · · · · · · · ·			-		)	
	11	Subtract line 10 from line 9. This is yo	ur <b>adjusted gross incon</b>	ne.			. 1'		16,240.
	12	Itemized deductions (from Schedule deduction (see instructions)						2	13,850.
	13a	Qualified business income deduction	from Form 8995 or Form	8995-A	. <b>13a</b>				
	b	Exemptions for estates and trusts only	,						
	С	Add lines 13a and 13b							10 055
	14		· · · · · · · · ·						13,850.
	15 Datis	Subtract line 14 from line 11. If zero or					. 1		2,390.

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

Form **1040-NR** (2023)

Form 1040-NR (2	2023)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check if an	y from For	rm(s): <b>1</b> 🗌 88	314 <b>2</b> 🗌 49	72 3		16	239.
Credits	17	Amount from Schedule 2 (Form 1	1040), line	3				17	0.
	18	Add lines 16 and 17						18	239.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (Form 1	040)		19	
	20	Amount from Schedule 3 (Form 1	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	239.
	23a	Tax on income not effectively cor	nnected w	rith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), I	ine 15 .			23a			
	b	Other taxes, including self-emplo	oyment ta	x, from Schedule	e 2 (Form 1040),				
		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> :	<b>x</b>		<u></u> .		24	239.
ayments	25	Federal income tax withheld from	n:						
-	а	Form(s) W-2				25a	1,638	•	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	1,638.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments an	d amount	applied from 20	22 return .	<u>.</u>		26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S	chedule 8	812 (Form 1040	)	28			
	29	Credit for amount paid with Form	n 1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1	1040), line	15		31			
	32	Add lines 28, 29, and 31. These a	are your <b>t</b> e	otal other paym	ents and refund	lable credits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your <b>to</b>	otal payments			33	1,638.
efund	34	If line 33 is more than line 24, sul	otract line	24 from line 33.	This is the amou	unt you <b>overpaid</b>		34	1,399.
	35a	Amount of line 34 you want refu			is attached, che	eck here	🗆	35a	1,399.
rect deposit?	b	Routing number 0 4 4 0			с Туре: 🛛 🖄	Checking	Savings		
e instructions.	d	Account number 7 7 6 0	3 0	527					
	е	If you want your refund check m	ailed to a	n address outsid	le the United Sta	ites not shown on	page 1,		
		enter it here.							
	36	Amount of line 34 you want appl	ied to you	ur 2024 estimat	ed tax	36			
mount	37	Subtract line 33 from line 24. This		-					
ou Owe		For details on how to pay, go to	0	5		1 1		37	
r	38	Estimated tax penalty (see instru	,			38			
hird	Do yo	u want to allow another person to	discuss t	his return with th	e IRS? See instr	uctions. 🗌 Y	es. Com	plete be	low. 🛛 No
arty	Desig	nee's		Phone			nal ident	ification	
esignee	name						er (PIN)		
		penalties of perjury, I declare that I hav they are true, correct, and complete. D							
Sign	,		Solaration						ent you an Identity
-	Yours	signature		Date	Your occupatio	n			PIN, enter it here
lere					DEVOPS EN	GINEER		e inst.)	
F	Phone	e no.		Email address			<b>1</b>	,	
		rer's name	Preparer	's signature		Date	PTIN		Check if:
aid	•	TA SAI PAVAN KUMAR DUDIPALLI	•	0	JMAR DUDIPALLI	r	P024	70833	Self-employed
						-1			
-	Firm's	sname (FLORAL TAXES I	i LiC				FIIOHE	110. I P	/8/902-92//
Preparer Jse Only		aname GLOBAL TAXES I address 245 ROONEY C		NINSWICK N	T 08816		Phone Firm's		<u>78)965-9522</u> 88-2145487

### SCHEDULE NEC (Form 1040-NR)

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

Attach to Form 1040-NR.

OMB No. 1545-0074

Sequence No. 7B

23

Department of the Treasury Internal Revenue Service

Report property sales or

Form 4797, or both.

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

Your identifying number

2

Attachment

183-97-1885

Name shown on Form 1040-NR AAMER S MOHAMMED

Enter a	amount of income under the appropriate rate of tax. See instructions.						
	Nature of Income		<b>(a)</b> 10%	<b>(b)</b> 15%	( <b>c)</b> 30%		(specify)
		_	(,, , , , , , , , , , , , , , , , , , ,	(1)	(),	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):						
		1 1 2					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add colur	nns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040	)-NR, line 23a <b>15</b>	
	Capital Gains and Losses	From	Sales or Excha	inges of Proper	<b>y</b>		
losses f exchan within t	Inly the capital gains and from property sales or ges that are from sources he United States and not       16       (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)       (b) Date acc mm/dd/y		<b>(c)</b> Date sold mm/dd/yyyy	(d) Sales price	<b>(e)</b> 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. s. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	y interest; report these nd losses on Schedule D						
(Form 1	040).						

exchanges that are effectively connected with a U.S. business **17** Add columns (f) and (g) of line 16 on Schedule D (Form 1040),

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-. .

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

Schedule NEC (Form 1040-NR) 2023

18

17 (

### SCHEDULE OI (Form 1040-NR)

# **Other Information**

Attach to Form 1040-NR.

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

OMB No. 1545-0074
2023
Attachment

	construction         Go to www.irs.gov/Form1040NR for instructions and the latest information.           ternal Revenue Service         Answer all questions.					Attachment Sequence No. 7C		
Name sł	nown on Form 1040-NR				Your identify	ing number		
AAME	CR S MOHAMMED				183-97-			
Α	Of what country or countries	were you a citizen or nation	al during the tax year?	INDIA				
в	In what country did you claim	residence for tax purpose	es during the tax year?	United States				
С	Have you ever applied to be a	a green card holder (lawful p	permanent resident) of	the United States? .		. 🗌 Yes	🗙 No	
D	Were you ever:		_					
							🗙 No	
2.	A green card holder (lawful pe				· · ·	. 🗌 Yes	🗙 No	
-	If you answer "Yes" to (1) or (a lf you had a visa on the last					•		
Е	immigration status on the last				-			
F	Have you ever changed your		atus) or IIS immigratio	n status?		. Ves	🗙 No	
•	If you answered "Yes," indica							
G	List all dates you entered and							
-	Note: If you're a resident of (		•		ent intervals	3,		
	check the box for Canada o	r Mexico and skip to item I	Н	🗌 Canada	Mexico	0		
	Date entered United States	Date departed United Stat	tes Da	te entered United States	s Date de	eparted Unite	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy		
Н	Give number of days (including 2021			•		J:		
1	Did you file a U.S. income tax	, 2022, return for any prior year?	, anu 202	<u> </u>	·•	. 🛛 Yes	No	
•	If "Yes," give the latest year a							
J	Are you filing a return for a tru	st?				 . □Yes	🗙 No	
	If "Yes," did the trust have a							
	U.S. person, or receive a cont						🗌 No	
Κ	Did you receive total compen	sation of \$250,000 or more	during the tax year? .			. 🗌 Yes	🛛 No	
	If "Yes," did you use an altern						🗌 No	
L	Income Exempt From Tax-I				tax treaty w	ith a foreign	n country,	
_	complete (1) through (3) below							
1.	Enter the name of the country, amount of exempt income in t				claimed the	treaty benefi	it, and the	
	·			1	( I)	A	4	
	( <b>a</b> ) Cou	untry	(b) Tax treaty article	(c) Number of month claimed in prior tax year		Amount of exe ne in current ta		
							un your	
				1				
	(e) Total. Enter this amount of	on Form 1040-NR, line 1k. [	Do not enter it anywher	e else on line 1				
	Were you subject to tax in a f						🗌 No	
3.	Are you claiming treaty benef	•	•			. 🗌 Yes	🗙 No	
	If "Yes," attach a copy of the	Competent Authority deter	mination letter to your r	eturn.				
M	Check the applicable box if:					affe attack		
1.	This is the first year you are m with a U.S. trade or business							
2	You have made an election i							

States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR. REV 02/05/24 PRO Schedule OI (Form 1040-NR) 2023 BAA