## 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

internal nevertue Service							
Submission Identification Number (SID)							
Taxpayer's name	Social sec	urity number					
KHAJA MOHIDDIN MOHAMMAD	814-4	814-48-9150					
Spouse's name	Spouse's	Spouse's social security number					
Part I Tax Return Information — Tax Year Ending D	December 31, 2023 (Enter year you	are authorizing.)					
Enter whole dollars only on lines 1 through 5.	I. C. Indonesia						
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 1 Adjusted gross income		<b>1</b>   3,500.					
2 Total tax							
3 Federal income tax withheld from Form(s) W-2 and Form(s)							
5 Amount you owe		- 200.					
Part II Taxpayer Declaration and Signature Authorize	zation (Be sure you get and keep a co	opy of your return)					
Under penalties of perjury, I declare that I have examined a copy of the inmy knowledge and belief, it is true, correct, and complete. I further decreturn (original or amended) I am now authorizing. I consent to allow my to send my return to the IRS and to receive from the IRS (a) an acknowle for any delay in processing the return or refund, and (c) the date of any range Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to payment of my federal taxes owed on this return and/or a payment of exist authorization is to remain in full force and effect until I notify the U.S. payment, I must contact the U.S. Treasury Financial Agent at 1-888-3 business days prior to the payment (settlement) date. I also authorize the taxes to receive confidential information necessary to answer inquiries personal identification number (PIN) below is my signature for the incom Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  ERO firm name	clare that the amounts in Part I above are the a intermediate service provider, transmitter, or electedgement of receipt or reason for rejection of the efund. If applicable, I authorize the U.S. Treasure of the financial institution account indicated in the timated tax, and the financial institution to debit of the treasury Financial Agent to terminate the author 353-4537. Payment cancellation requests must be financial institutions involved in the processing and resolve issues related to the payment. It	amounts from the income tax ctronic return originator (ERO) to transmission, <b>(b)</b> the reason of and its designated Financial to tax preparation software for the entry to this account. This rization. To revoke (cancel) a be received no later than 2 of the electronic payment of further acknowledge that the torizing and, if applicable, my  8 9 1 5 0  Enter five digits, but					
ERO firm name		don't enter all zeros					
signature on the income tax return (original or amended)	· ·						
I will enter my PIN as my signature on the income tax re if you are entering your own PIN and your return is filed below.							
Your signature ▶	Date ▶						
Spouse's PIN: check one box only	_						
	to enter or generate my PIN	as my					
ERO firm name		Enter five digits, but					
signature on the income tax return (original or amended)	I am now authorizing.	don't enter all zeros					
I will enter my PIN as my signature on the income tax re if you are entering your own PIN <b>and</b> your return is filed below.							
Spouse's signature ▶	Date ►						
Practitioner PIN Method I	Returns Only—continue below						
Part III Certification and Authentication — Practition	ner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-		6 6 1 9 8 9 enter all zeros					
I certify that the above numeric entry is my PIN, which is my signature fauthorized to file for tax year indicated above for the taxpayer(s) indicated requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for	ted above. I confirm that I am submitting this r	eturn in accordance with the					
ERO's signature ▶	Date ►						
	Form - See Instructions						
	e 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 Jar	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	0	See separate instructions.
Your first name	and r	niddle initial	Last na	ame		,	Your iden	
							(see instru	ctions)
KHAJA MOH	HIDE	OIN	MOHA	MMAD			814-4	8-9150
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
5637 CRIM	ISON	OAKS DR						
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.	:	State	ZI	P code
FRISCO						TX	7.	5035
Foreign country	nam nam	e	Foreign	n province/state/county	I	oreign po	stal code	
Filing	×	Single Married filing sens	arately (N	ΛΕS) □ Qualifvii	na survivina snouse (C	1221	☐ Fetat	a Trust
Status		•	• •	•	0 , ,	,		o 🗀 mast
Check only	"	you oncolled the QCC Box, office the	orma o m	ano ii ino quamying pore	son io a orma sacriot y	our dopor		
Digital Assets							. ,	
D	+	wise dispose of a digital asset (of a	ilialiciai	Interest in a digital asset				
-				(2) Dependent's		1		i i
(See Instructions)		(1) First name Last name		identifying number	(3) Relationship to you	Chila	tax credit	dependents
Your first name a  KHAJA MOH: Home address (r 5637 CRIMS City, town, or pore or service of the								
							<u> </u>	
	1a	( ) ,	`	,			1a	3,500.
_	b	. , , , ,		` '				
	C			,				
				` '	,			
	e	·		·				
Business				·				
Attach		•	streed, if you have a P.O. box, see instructions.  S DR  Town have a foreign address, also complete spaces below.  Foreign province/state/county  Foreign p					
		•	,				In	
,	:						11	
RRB-1042-S,	J V				1 1		.,	
	Α.							
	7	` '					1z	3,500.
		ı	1	1	kable interest			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	3a	· —	_					
	4a				•		4b	
If you did not	5a	Pensions and annuities 5a	а				5b	
•	6			<del></del>			6	
	7	Capital gain or (loss). Attach Schedu	Last name  MOHAMMAD  P.O. box, see instructions.  Iddress, also complete spaces below.  Foreign province/state/county  GOS)  Alternative province/state/county  Foreign province/state/cou	e 🗆	7			
	8	Additional income from Schedule 1	(Form 10	040), line 10			Instruction   Instruction   Your identifying num   (see instructions)   814-48-9150   Apt. n   Apt.	
	9	Last name   Vour identifying number   Credit   C	3,500.					
	10	•	•		•			
KHAJA MOHIDDIN						11	3,500.	
	12	· · · · · · · · · · · · · · · · · · ·					ı 📗	
				13,850.				
	13a							
	b	Exemptions for estates and trusts o						
	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 ta	xable income		15	0.

Form 1040-NR (2	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from	m For	rm(s): <b>1</b>	314 <b>2</b>	'2	з 🗌		16		0.
Credits	17	Amount from Schedule 2 (Form 1040)							17		0.
	18	Add lines 16 and 17							18		0.
	19	Child tax credit or credit for other dep	pende	ents from Schedi	ule 8812 (Form 10	040)			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 of	or less	s, enter -0					22		0.
	23a	Tax on income not effectively connec	ted w	rith a U.S. trade o	or business from						
		Schedule NEC (Form 1040-NR), line 1	5 .			23a					
	b	Other taxes, including self-employme	ent ta	x, from Schedule	e 2 (Form 1040),						
		line 21				23b					
	С	Transportation tax (see instructions)				23c					
	d	Add lines 23a through 23c							23d		
	24	Add lines 22 and 23d. This is your tot	tal ta	<b>x</b>					24		0.
Payments	25	Federal income tax withheld from:									
<b>,</b>	а	Form(s) W-2				25a		263.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c							25d		263.
	е	Form(s) 8805							25e		
	f	Form(s) 8288-A							25f		
	g	Form(s) 1042-S							25g		
	26	2023 estimated tax payments and am							26		
	27	Reserved for future use				27					
	28	Additional child tax credit from Scheo				28					
	29	Credit for amount paid with Form 104		` '		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3 (Form 1040)				31					
	32	Add lines 28, 29, and 31. These are y	, .				redits		32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and							33		263.
Refund	34	If line 33 is more than line 24, subtract							34		263.
riorana	35a	Amount of line 34 you want refunded				•	=		35a		263.
Direct deposit?	b	Routing number 1 1 1 0 0						Savings			
See instructions.	d	Account number 4 8 8 1 0									
	e	If you want your refund check mailed				es not	 shown on	page 1.			
	·	enter it here.									
	36	Amount of line 34 you want applied t	o voi	ur 2024 estimate	ed tax	36	1		-		
Amount	37	Subtract line 33 from line 24. This is t				00					
You Owe	٠.	For details on how to pay, go to www		-	see instructions .				37		
roa owe	38	Estimated tax penalty (see instruction	_	-		38					
Third		u want to allow another person to disc				_	Ye	es. Comp	lete be	low.	⊠ No
Party	•	Designee's Phone Personal identif									
Designee	name					ication					
	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 belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Sign				Date	Your occupation						an Identity
Here	Your signature Date Your occupation					I		•	nter it here		
11616					SOFTWARE I	EVE]	LOPER		inst.)	, 01	
ļ	Phone	e no.		Email address				, , , ,			
Daid			parer	's signature		Date	)	PTIN		Checl	k if:
Paid	•	'		Ü	JMAR DUDIPALLI			P0247	0833		elf-employed
Preparer		s name GLOBAL TAXES LLC		110	20211111111	1		Phone r			65-9522
Use Only		address 245 DOONEY OF E		TINGMTOR N	т 09916			Firm's F	, ,		<u>45487</u>

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#### **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

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information.

Sequence No. 7B

Your identifying number

814-48-9150 KHAJA MOHIDDIN MOHAMMAD 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 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 14 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 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). 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 (Form 1040). Report property sales or 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 -0-18 Form 4797, or both.

# 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

lame	shown on Form 1040-NR			'	Your identifying	number					
KHA	AJA MOHIDDIN MOHAMMAD				814-48-9	150					
Α	Of what country or countries were you a citizen or na	ational during the t	ax year?	INDIA							
В	In what country did you claim residence for tax purp	poses during the t	ax year?	United States							
С	Have you ever applied to be a green card holder (lav	vful permanent res	ident) of	the United States? .		Yes	⊠ No				
D	Were you ever:										
1	. A U.S. citizen?					☐ Yes	⊠ No				
2	2. A green card holder (lawful permanent resident) of the	ne United States?				☐ 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 type (nonimmigrant status) or U.S. immigration status?									
G	Note: If you're a resident of Canada or Mexico ANI	If you answered "Yes," indicate the date and nature of the change:  List all dates you entered and left the United States during 2023. See instructions.  Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,  check the box for Canada or Mexico and skip to item H									
	Date entered United States Date departed United mm/dd/yy mm/dd/yy	d States	Da	te entered United States mm/dd/yy		arted Unite mm/dd/yy	d States				
						_					
Н	Give number of days (including vacation, nonworkdays 2021, 2022										
I	Did you file a U.S. income tax return for any prior year if "Yes," give the latest year and form number you file	ar?				⊠ Yes	□No				
J	Are you filing a return for a trust?	under the grantor	 trust rule	es, make a distribution	 or loan to a	☐ Yes	⊠ No □ No				
K	Did you receive total compensation of \$250,000 or n					☐ Yes	⊠ No				
	If "Yes," did you use an alternative method to detern					☐ Yes	☐ No				
L	Income Exempt From Tax—If you are claiming execomplete (1) through (3) below. See Pub. 901 for mo				ax treaty with	a foreign	country,				
1	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.										
	(a) Country	(b) Tax treat	•	(c) Number of months	` '						
	(e) Total. Enter this amount on Form 1040-NR, line	1k. Do not enter it	anywher	e else on line 1							
2			-			Yes	☐ No				
3	3. Are you claiming treaty benefits pursuant to a Comp		☐ Yes	⊠ No							
	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
М	Check the applicable box if:										
1	<ul> <li>This is the first year you are making an election to tre with a U.S. trade or business under section 871(d).</li> </ul>						onnected $\square$				
2	<ol> <li>You have made an election in a previous year that States as effectively connected with a U.S. trade or</li> </ol>										