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

Submission Identification Number (SID)			•				
Taxpayer's name	So	Social security number					
MIRZA R BAIG	060-33-5297						
Spouse's name	Sı	oouse's socia	al securit	y number			
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter ye	ear you ar	e autho	orizing.)			
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	2,	842.		
2 Total tax		+	2		0.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		+	3				
4 Amount you want refunded to you		-	4				
5 Amount you owe			5	ur rotur	<u>0.</u>		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original to the control of the income tax return (original to the control of the income tax return (original to the control of the income tax return (original to the control of the income tax return (original to the control of the income tax return (original to the control of the control							
return (original or amended) I am now authorizing. I consent to allow my intermediate service properties and to receive from the IRS (a) an acknowledgement of receipt of for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finantiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agrayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment of business days prior to the payment (settlement) date. I also authorize the financial institutions taxes to receive confidential information necessary to answer inquiries and resolve issues in personal identification number (PIN) below is my signature for the income tax return (original of Electronic Funds Withdrawal Consent.	or reason for rejectic authorize the U.S. ion account indicat inancial institution to tent to terminate th cancellation reques is involved in the pro- related to the payr	on of the tra Treasury an ed in the tax o debit the e e authorizat ts must be ocessing of ment. I furth	nsmission d its design of the control cion. To received the election acknowledge in the control cion of the con	on, (b) the signated Fation soft this accourevoke (cd no later tronic payowledge	e reason Financial ware for unt. This ancel) a r than 2 rment of that the		
Taxpayer's PIN: check one box only							
<u></u> -	er or generate my	PIN 3	5 2	9 7	as my		
ERO firm name signature on the income tax return (original or amended) I am now authorizing		Ente	er five dig 't enter a		as my		
I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.							
Your signature ►	Date ▶						
Spouse's PIN: check one box only							
	er or generate my	DINI			ac my		
ERO firm name	or generate my		er five dig	its. but	as my		
signature on the income tax return (original or amended) I am now authorizing	ng.		't enter a				
I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.							
Spouse's signature ▶	Date ►						
Practitioner PIN Method Returns Only—con							
Part III Certification and Authentication — Practitioner PIN Method (Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected F	PIN. 2 2 2	4 9 6		9 8	9		
				-			
I certify that the above numeric entry is my PIN, which is my signature for the electronic indivauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file	that I am submittir	ng this retur	n in acc	cordance			
ERO's signature ▶	Date ►						
ERO Must Retain This Form — See Ins Don't Submit This Form to the IRS Unless Red		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	n. 1–C	Dec. 31, 2023, or other tax year beginn	ing	, 20	023, e	nding	,	20	See separate instructions.	
Your first name	irst name and middle initial Last name Yo							Your identifying number see instructions)		
MIRZA	R BAIG						060-	060-33-5297		
Home address (numl	ber and street). If you have a P.O. box	, see ir	structions.					Apt. no.	_
1177 ROSE	CI	1								
City, town, or po	ost o	ffice. If you have a foreign address, als	so com	plete spaces below.			State		ZIP code	
KENT							OH		44240	
Foreign country	nam	e	Forei	gn province/state/cou	ınty		Foreign p	oostal co	de	
Filing Status	ı	Single Married filing sepa		,	, .	surviving spouse (,		tate	į
Check only one box.				. , ,						
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f							exchange, or . 🗌 Yes 🔀 N	lo
Dependents							(4) Ch	eck the box	c if qualifies for (see ins	st.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	r	(3) Relationship to yo	Chil	d tax credi	it Credit for other dependents	r
		(i) i i ot hamo		,g		(c) Holdhorlorip to yo	<u>u</u>			
If more than four										
dependents, see instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see	instructions)				. 1a	2,842	2.
Effectively	b	Household employee wages not rep	orted c	on Form(s) W-2				. 1b		
Connected	С	Tip income not reported on line 1a (s	see ins	tructions)				. 1c		
With U.S.	d	Medicaid waiver payments not report	rted on	Form(s) W-2 (see ins	tructio	ons)		. 1d		
Trade or	е	Taxable dependent care benefits fro	m Forr	n 2441, line 26				. 1e		
Business	f	Employer-provided adoption benefit	s from	Form 8839, line 29				. 1f		
Attach	g	Wages from Form 8919, line 6						. 1g		
Form(s) W-2,	h	Other earned income (see instruction	,					. 1h		
1042-S,	i	Reserved for future use								
SSA-1042-S, RRB-1042-S,	j	Reserved for future use				1 1		. <u>1j</u>		
and 8288-A	k	Total income exempt by a treaty from								
here. Also attach	_	line 1(e)				. 1k		1-	2,842)
Form(s)	z 2a	Tax-exempt interest 2a	1	1		ble interest		. 1z . 2b	2,042	•
1099-R if		Qualified dividends 3a	_			nary dividends		. 3b		
tax was withheld.	оа 4а	IRA distributions 48				ble amount				
If you did not	5a	Pensions and annuities 5a				ble amount				_
get a Form	6	Reserved for future use								
W-2, see instructions.	7 Capital gain av (leas) Attach Schodula D (Farm 1940) if vaguived if not vaguived check have									
mondono.	8	Additional income from Schedule 1	Form 1	1040), line 10				. 8		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This	is your total effective	ely co	nnected income .		. 9	2,842	? .
	 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income Subtract line 10 from line 9. This is your adjusted gross income 									
								. 11	2,842	2.
	12	Itemized deductions (from Schedu deduction (see instructions)	•	,, .					13,850).
13a Qualified business income deduction from Form 8995 or Form 8995-A . 13a									·	_
b Exemptions for estates and trusts only (see instructions) 13b										
	c 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 you	ır tax a	able income		. 15	0).

Form 1040-NR (2023)										Page
Tax and	16	Tax (see instructions). Check if any fro	m Fo	rm(s): 1 8	314 2 [4972	2 ;	3 🗆 <u> </u>		16	0.
Credits	17	Amount from Schedule 2 (Form 1040)), line	3						17	0.
0.000	18	Add lines 16 and 17								18	0.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)									
	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	s, enter -0						22	0.
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line		vith a U.S. trade			23a				
	b	Other taxes, including self-employm line 21	ent ta	x, from Schedul	e 2 (Form 1	040),	23b				
	С	Transportation tax (see instructions)					23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your to								24	0.
Payments	25	Federal income tax withheld from:									
. ayoo	а	Form(s) W-2					25a				
	b	Form(s) 1099					25b				
	С	Other forms (see instructions)					25c				
	d	Add lines 25a through 25c								25d	
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and ar								26	
	27	Reserved for future use					27				
	28	Additional child tax credit from Sche					28			-	
	29	Credit for amount paid with Form 10					29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 1040					31			-	
	32	Add lines 28, 29, and 31. These are	,.					edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and								33	
Defined	34	If line 33 is more than line 24, subtra								34	
Refund	35a	Amount of line 34 you want refunde					-	=		35a	
Direct deposit?		Routing number X X X X			c Type:	_		_	Savings	SSA	
Direct deposit? See instructions.	b d	Account number X X X X X X							Saviriys		
	е	If you want your refund check mailed enter it here.	ı to ai	n address outsit	ie the Onite	u Siaie	s not	Shown on	page 1,		
	36	Amount of line 34 you want applied					36				
A	37	Subtract line 33 from line 24. This is				•	30				
Amount	31	For details on how to pay, go to www		•		tione				37	
You Owe	20		_	•						31	0.
Theirest		38 Estimated tax penalty (see instructions)								loto bo	low. 🗵 No
Third Party	Do you want to allow another person to discuss this return with the IRS? See instructions. Yes. Comp										
Party Designee	Designee's Phone Personal iden name no. Personal iden number (PIN)						fication				
Designee	name nonumber (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which										
Sign					Your occu		, a o a				ent you an Identity
Here	Your	signature		Date	STUDEN	•			Pro		PIN, enter it here
t	Phon	e no.		Email address					1 (
D-:-I			parer	's signature			Date		PTIN		Check if:
Paid				_	ידחוזת אאשו	Τ.Τ.ΤΔΟ			P0247	0833	Self-employed
Preparer	Firm's name CIODAT TAYES LIC										
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's El								(0 : 0 / 2 0 0 0 0 0 0 0		

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

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

Your identifying number

060-33-5297 MIRZA R BAIG 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 3 4 Motion picture or TV copyright royalties 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 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 (f) LOSS 16 (a) Kind of property and description (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 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)

Department of the Treasury

Internal Revenue Service

Other Information

Attach to Form 1040-NR.

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

Attachment Sequence No. **7C**

OMB No. 1545-0074

Name sl	nown on Form 1040-NR				Your identifying number	er					
MIRZ	ZA R BAIG				060-33-5297						
Α	Of what country or countries v										
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	f the United States? .	🗌 Y e	es 🗵 No							
D	Were you ever:										
1.	A U.S. citizen?		🗆 Y e	es 🗵 No							
2.	A green card holder (lawful pe	🗆 Y e	es 🗵 No								
	If you answer "Yes" to (1) or (2	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											
G	List all dates you entered and	left the United States durin									
	Note: If you're a resident of C				ient intervals,						
	check the box for Canada or	Mexico and skip to item h	1	\square Canada	☐ Mexico						
	Date entered United States	Date departed United Stat	es D	ate entered United State	es Date departed U	nited States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd						
Н	Give number of days (including										
	2021	, 2022	, and 20	023 365							
I	Did you file a U.S. income tax					es 🗌 No					
	If "Yes," give the latest year ar	nd form number you filed:	10	40NR							
J	Are you filing a return for a true					es 🛛 No					
	If "Yes," did the trust have a l										
	U.S. person, or receive a contr										
K	Did you receive total compens										
	If "Yes," did you use an alterna			•							
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.										
1.	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 amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.										
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye							
	(e) Total. Enter this amount o	n Form 1040-NR line 1k Γ	L On not enter it anvwhe	ere else on line 1							
2.			-			es No					
		Were you subject to tax in a foreign country on any of the income shown in 1(d) above?									
٠.	If "Yes," attach a copy of the Competent Authority determination letter to your return.										
М	Check the applicable box if:										
	This is the first year you are m with a U.S. trade or business u										
2.	You have made an election in States as effectively connecte	n a previous year that has	not been revoked, t	o treat income from re	eal property located	in the United					