Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

2

Return completed Form 8879 to your ERO. (Don't send to the IRS.)
 Go to www.irs.gov/Form8879 for the latest information.

Submission	Identification	Number	(SID)
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Тахрау	yer's name Socia	I security number		
ARS	SHAD ALI MOHAMMAD 74	6-73-2827		
Spouse's name Spouse's social security				r
Par	t I Tax Return Information – Tax Year Ending December 31, 2018 (Whole	dollars only)		
1	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)		1	51,904.
2	Total tax (Form 1040, line 15; Form 1040NR, line 61)		2	4,723.
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040)	NR, line 62a) .	3	6,919.
4		4	2,196.	
5		5		

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

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. 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 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 my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's	PIN:	check	one	box	only
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\mathbf{X}	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	3	2	8	2 7	/
			ERO firm name		Ente	r five	digi	ts, but	1
	as my signa	ture on my tax year	2018 electronically file	ed income tax return.	don'	t ente	r all	zeros	j.
		, , ,	, ,	018 electronically filed income tax return. Ch ne Practitioner PIN method. The ERO must c					
Your sig	nature 🕨			Date ►					
Spouse	's PIN: chec	k one box only					_		7
	I authorize			to enter or generate my PIN					
			ERO firm name		Ente	r five	digi	ts, but	
	as my signa	ture on my tax year	2018 electronically file	ed income tax return.	don'	t ente	r all	zeros	í.

I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. 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 ►

													_
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-digit self-selected PIN.		5	8	7	2	7	8	1	2	3	4	5	
			Don't enter all zeros										
بمالح بالشريع الم	at the choice succession anticident of DNL subjects is set simple to the task set of O	10		+		ie:	امدا						£

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return 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

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 1040	NR		U.S. Nonresid	lent Alien I	ncom			rn formatic	'n	L	OMB No	o. 1545-0074
Department of the			For the year Jan	uary 1-December 3							20)18
Internal Revenue S				2018, and ending				, 20		if in a m		
			name and initial	Last name								e instructions)
			D ALI ome address (number and street or rural rou				-41	A	74	1	-2827	
Diagon print			,	te). If you have a P	.U. DOX, S	ee instru	ctions.	Apt. no.		Check	-	Individual
Please print			WRENTHAM RD					2				Estate or Trust
or type			or post office, state, and ZIP code. If you ha	ave a foreign addre	ess, also c	omplete	spaces be	elow. See i	nstruct	ions.		
			RLAND RI 02864		- ·							
	Fore	gn cc	ountry name		Foreign p	orovince	/state/cou	nty			Foreig	gn postal code
		_					1 -					
Filing	1		Reserved			4	Reserv					
Status		_	Single nonresident alien			5	-	d nonres				
Check only	3		Reserved			6		-		(see in	struction	s)
one box.							Child's	name 🕨				
Dependents	7	Der	pendents: (see instructions)	(2) Depender	nt's	(3) Der	pendent's		(4)	if qualifi	es for (see	inetr.):
If more) First name Last name	identifying nur			ship to you	1 Chil	d tax c	•	1	other dependents
than four		(1)								reuit	Credit IO	
dependents,												
see instructions and check												
here.												
	8	Wa	ges, salaries, tips, etc. Attach Form(s	s) W_2	I					8		54,404.
Income			(able interest	,					•	9a		51,101.
Effectively			c-exempt interest. Do not include or			1			·	54		
Connected			linary dividends							10a		
With U.S.			alified dividends (see instructions)			1		• • •	·	Tua		
Trade/			able refunds, credits, or offsets of st					tions)		11		
Business	12		olarship and fellowship grants. Attach F							12		
	12		siness income or (loss). Attach Sched	()			•		,	12		
						,			_	14		
	14		bital gain or (loss). Attach Schedule D (l	,	•							
Attach Form(s)			er gains or (losses). Attach Form 479							15 16		
W-2, 1042-S, SSA-1042S,	16				1					-		
RRB-1042S,			s, pensions, and annuities 17a					unt (see ir	,	17b		
and 8288-A here. Also	18		ntal real estate, royalties, partnership				•	,		18		
attach Form(s)			m income or (loss). Attach Schedule	· ,						19		
1099-R if tax			employment compensation					• • •	·	20		
was withheld.			er income. List type and amount (se						-	21		
			al income exempt by a treaty from page 5, mbine the amounts in the far right			22				-		
	23		ectively connected income							00		E4 404
	24		ucator expenses (see instructions)			24			•	23		54,404.
Adjusted			alth savings account deduction. Attac			24						
Gross			ving expenses for members of the			20						
Income	20		m 3903			26						
	27		ductible part of self-employment tax			20						
	-1		rm 1040)			27						
	28		f-employed SEP, SIMPLE, and qualif			28						
	20 29		f-employed health insurance deducti	•		20						
	29 30		nalty on early withdrawal of savings.			30						
	30 31		olarship and fellowship grants exclu			30						
	32		deduction (see instructions)			32						
	32 33		dent loan interest deduction (see ins			32		2,5	00			
	33 34	Δdd	dent loan interest deduction (see ins	25(34		
	34 35		usted Gross Income. Subtract line									51,904.
										35 36		51,904.
Tax and	36 37		ount from line 35 (adjusted gross inc nized deductions from page 3, Sch							30		12,000.
Credits	37 38		alified business income deduction (se							38		±2,000.
	39		emptions for estates and trusts only (,						39		
For Disclocure P			and Paperwork Reduction Act Notice, se		/					05	Form 10	040NR (2018)
i or pisciosure, P	ivacy	πυι,	and raperwork neuronon Act Notice, se	e man deuolis.	BAA		KE.	V 05/02/19 F	KU			(2010)

Form 1040NR (201	8)							Page 2
Taxand	40	Add lines 37 through 39					40	12,000.
Tax and	41	Taxable income. Subtract line 40 from					41	39,904.
Credits	42	Tax (see instr.). Check if any is from For	rm(s): a 🗌 8814 🛛 b	o 🗌 497	72 c]	42	4,723.
(continued)	43	Alternative minimum tax (see instruction	ons). Attach Form 62	251 .			43	
	44	Excess advance premium tax credit rep	•				44	
	45	Add lines 42, 43, and 44		· .		🕨	45	4,723.
	46	Foreign tax credit. Attach Form 1116 if	required	. 4	16			
	47	Credit for child and dependent care exper		41 4	17			
	48	Retirement savings contributions credit			18			
	49	Child tax credit and credit for ot						
		instructions)		. 4	19			
	50	Residential energy credit. Attach Form			50			
	51	Other credits from Form: a 3800 b	□ 8801 c □	5	51			
	52	Add lines 46 through 51. These are you					52	
	53	Subtract line 52 from line 45. If zero or I					53	4,723.
	54	Tax on income not effectively connect						
Other		Schedule NEC, line 15					54	
Taxes	55	Self-employment tax. Attach Schedule	SE (Form 1040) .				55	
	56	Unreported social security and Medicar	e tax from Form: a	a 🗌 413	37	b 🗌 8919	56	
	57	Additional tax on IRAs, other qualified re	etirement plans, etc.	Attach	Form 53	29 if required	57	
	58	Transportation tax (see instructions)					58	
	59 a	a Household employment taxes from Sch	edule H (Form 1040))			59a	
		Repayment of first-time homebuyer cre					59b	
	60	Taxes from: a Form 8959 b Instr	ructions; enter code(s	s)			60	
	61	Total tax. Add lines 53 through 60 .					61	4,723.
Deserves	62	Federal income tax withheld from:						
Payments	a	a Form(s) W-2 and 1099.....		. 6	2a	6,919.		
	k) Form(s) 8805		. 6	2b			
	c	: Form(s) 8288-A		. 6	2c			
	c	1 Form(s) 1042-S		. 6	2d			
	63	2018 estimated tax payments and amount	applied from 2017 retu	urn 6	63			
	64	Additional child tax credit. Attach Sched	dule 8812	. 6	64			
	65	Net premium tax credit. Attach Form 89		. 6	65			
	66	Amount paid with request for extension	to file (see instruction	ns) 6	6			
	67	Excess social security and tier 1 RRTA tax v	vithheld (see instructior	ns) 🛛 🖸	67			
	68	Credit for federal tax on fuels. Attach Fo	orm 4136	. 6	68			
	69	Credits from Form: a 2439 b Reserved	c 🗌 8885 d 🗌	e	69			
	70	Credit for amount paid with Form 1040-	-C	. 7	70			
	71	Add lines 62a through 70. These are yo	ur total payments				71	6,919.
		If line 71 is more than line 61, subtract li		his is th	ne amoun	t you overpaid	72	2,196.
Refund	73a	Amount of line 72 you want refunded to	o you. If Form 8888 i	is attacl	hed, cheo	ck here . 🕨 🗌	73a	2,196.
Direct deposit?	k	Routing number 1 1 1 0 0 0 0	0 2 5 🕨 cTy	ype: 🗙	Checkir	ng 🗌 Savings		
See instructions.	c	Account number 4 8 8 0 6 4	7 8 7 4 3 1					
	e	If you want your refund check mailed to an address	ss outside the United Stat	tes not sh	nown on pa	ge 1, enter it here.		
						-		
	74	Amount of line 72 you want applied to you	r 2019 estimated tax	▶ 7	74			
Amount	75	Amount you owe. Subtract line 71 from l	ine 61. For details on	how to	pay, see i	nstructions	75	
You Owe	76	Estimated tax penalty (see instructions)		. 7	76			
Third Party	Doy	ou want to allow another person to discu	uss this return with th	he IRS?	See inst	ructions 🗌 🏾	es. Co	mplete below. XNo
Designee			Phone			Personal i		ion
		gnee's name ► er penalties of perjury, I declare that I have examir	no. ►	mnanvinc	rschedules	number (F		▶ best of my knowledge and
Sign Here		f, they are true, correct, and complete. Declaration						
Keep a copy of	Your	signature	Date	r occupat	tion in the l	Jnited States		S sent you an Identity
this return for	etum for							on PIN, enter it here r.)
your records.			SOL	FTWAR	E ENG	INEER		
Deid	Prin	t/Type preparer's name Prepare	er's signature			Date	Charl	
Paid	APPA	ANA RUPA VENKATA SATYA SAI MANIKUMAR					Check self-emp	bloyed P02090332
Preparer Use Only		's name ► GLOBAL TAXES LLC				Firm's EIN ►		<u> </u>
USE Only		's address ► 2530 Pebble Creek	Ln Cumming GA	A 3004	41	Phone no.		

Schedule A-	-Iten	nized Deductions (see instructions)		07
Taxes You Paid	1	State and local income taxes		
	а	State and local income taxes		
	b	Enter the smaller of line 1a and \$10,000 (\$5,000 if married)	1b	
Gifts to U.S.	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions 2		
Charities If you made a gift and	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if the amount of your deduction is over \$500 3	-	
received a penefit in return, see nstructions.	4	Carryover from prior year		
	5	Add lines 2 through 4	5	
Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		
Other Itemized Deductions	7	Other—from list in instructions. List type and amount	6	

Total
Itemized
Deductions8Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on
Form 1040NR, line 37

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Form **1040NR** (2018)

Form	1040NR	(2018)
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Page	4
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		Schedule NEC-Tax on Income Not E	ffectively	Cor	nnected With	a U.S. Trade or	Business (see ir	structions)	
				E	Enter amount of i	ncome under the app	propriate rate of tax	(see instructions)	
Nature of income		(a) 10%	(b) 15%	(a) 200/	(d) Other (specify)				
					(a) 1070	(b) 1376	(c) 30%	%	%
1	Dividends and divide	end equivalents:							
а	Dividends paid by U	S. corporations	1	1a					
b	Dividends paid by fo	preign corporations	1	1b					
С		t payments received with respect to section							
	transactions		· · · 1	1c					
2	Interest:								
а				2a					
b	Paid by foreign corp	porations		2b					
С				2c					
3		oatents, trademarks, etc.)		3					
4		V. copyright royalties		4					
5	• • • •	vrights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7				7					
8	•	fits		8					
9		e 18 below		9	,				
10	If zero or less, ente	ts of Canada only. Enter net income in column (c	<i>.</i>).						
	Winnings	er -0							
a b			1(0c					
11		Residents of countries other than Canada.							
		owed	1	11					
12				··					
			1	12					
13		12 in columns (a) through (d)		13					
14	-	rate of tax at top of each column		14					
15		ot effectively connected with a U.S. trade o			d columns (a) t	hrough (d) of line 1	4. Enter the total	here and on	
		54							
		Capital Gains and							
	nly the capital gains and from property sales or	16 (a) Kind of property and description	(b) Date		(c) Date			(f) LOSS	(g) GAIN
exchan	ges that are from	(if necessary, attach statement of	acquired		sold	(d) Sales price	(e) Cost or other basis	If (e) is more than (d), subtract (d)	If (d) is more than (e), subtract (e)
sources within the United States and not effectively		descriptive details not shown below)	(mo., day, yr.)		(mo., day, yr.)			from (e)	from (d)
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 a	nd losses on Schedule D								
(Form 1 Report	property sales or								
exchan	ges that are effectively								
on Scl	ted with a U.S. business nedule D (Form 1040),	17 Add columns (f) and (g) of line 16		· .			17		
Form 4	797, or both.	18 Capital gain. Combine columns (f) and	(g) of line 1	17. Er	nter the net gain	here and on line 9	above (if a loss, e	nter -0-) 🕨 🛛 18	

Μ

Schedule OI-Other Information (see instructions) Answer all questions

- Of what country or countries were you a citizen or national during the tax year? <u>INDIA</u> Α
- In what country did you claim residence for tax purposes during the tax year? India В Have you ever applied to be a green card holder (lawful permanent resident) of the United States? 🗌 Yes 🛛 No С Were you ever: D **1.** A U.S. citizen?
- If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Е If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. F1
- F If you answered "Yes," indicate the date and nature of the change.
- G List all dates you entered and left the United States during 2018. See instructions. Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

н Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during:
 2016
 365
 , 2017
 365
 , and 2018
 365
 .

 Did you file a U.S. income tax return for any prior year?
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	If "Yes," give the latest year and form number you filed 1040NR			
J	Are you filing a return for a trust?	Yes 🛛	🛛 No	,
	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a			
	U.S. person, or receive a contribution from a U.S. person?	Yes [No)
К	Did you receive total compensation of \$250,000 or more during the tax year?	Yes 🛛	🛛 No)
	If "Yes," did you use an alternative method to determine the source of this compensation?	Yes [No	,

- 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. 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 treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year				
	India	ARTICLE 21(2)	0	0.				
	(e) Total. Enter this amount on Form 1040NR, line 22.	Do not enter it on line 8	Borline 12 ►	0.				
2.	Were you subject to tax in a foreign country on any of the income shown in 1(d) above?							
3.	Are you claiming treaty benefits pursuant to a Competen	e you claiming treaty benefits pursuant to a Competent Authority determination?						
	If "Yes," attach a copy of the Competent Authority determination letter to your return.							
	Check the applicable box if:							
1.	This is the first year you are making an election to treat in		-	-				
	with a U.S. trade or business under section 871(d). See in	nstructions						
2.	You have made an election in a previous year that has	•						
	States as effectively connected with a U.S. trade or busin	ness under section 871	(d). See instructions					

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