Use the following information to prepare a Form 1040NR-EZ. Dahari Mad, a permanent resident of Malaysia (visa number XXXXXXXXX), came to the United States on an F-1 visa on August 1, 2011.

He has remained in the country since then and is a full-time student. Dahari, born 6/1/1990, is single. He began working at Delicious Enterprises, the local caterer, on 4/1/2012. He filed the proper withholding and treaty forms with the university payroll office before beginning his job.

Dahari is a citizen of Malaysia. If he is entitled to a refund, he wants it mailed to him. He doesn't want to designate anyone else to discuss this return with the IRS. He did not take any affirmative steps to apply for permanent residency in the United States. He will not be taxed in his home country on the income he has from the United States.

Using the following information (Form W-2), complete Dahari's federal income tax return. (He would also need to file a Form 8843, but assume that he has already completed that on his own.)

Form 1040NR-EZ

## U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents

OMB No. 1545-0074

Department of th	e Treasury		Nonresident Aliens With No Dependents Information about Form 1040NR-EZ and its instructions is at www.irs.gov/form1040nr					2014	
Internal Revenue		name and initial	Form 1040NR-EZ	Last name	is at ww	w.irs.gov/form10		ing number (see instructions)	
Please print or type.	Present h	ome address (number, street,	and apt. no., or rural r	route). If you have a P.O.	box, see	instructions.			
See separate instructions		n or post office, state, and ZIP country name	code. If you have a fo	reign address, also com Foreign province/sta				n postal code	
				i oroigii province/sta					
Filing Status Check only one box		Single nonresident alie	n 2	Married nonres	ident al	ien			
5	4 T 5 S	Vages, salaries, tips, etc axable refunds, credits, cholarship and fellowsh otal income exempt by a	or offsets of stat ip grants. Attach	te and local income Form(s) 1042-S or			. 3 4 . 5	14	
Attach Form(s) W-2 or	8 S 9 S	dd lines 3, 4, and 5 cholarship and fellowshi tudent loan interest dec ubtract the sum of line 8	p grants excluded luction	1 	 8 9 usted gr	ross income	. 7		
<b>1042-S</b> here. Also attach Form(s) 1099-R if tax was withheld.	12 S 13 E	emized deductions (se bubtract line 11 from line exemption (see instruction	910		· · · ·		. <u>11</u> . <u>12</u> . <u>13</u>		
	15 T 16 U	axable income. Subtrac ax. Find your tax in the Inreported social securit dd lines 15 and 16. This	tax table in the ir ty and Medicare t	nstructions... tax from Form: <b>a</b>	 [] 413]		. 15		
	18a F b F 19 2	ederal income tax with ederal income tax with 014 estimated tax payment credit for amount paid w	eld from Form(s) held from Form(s) s and amount appli	W-2 and 1099-R 1042-S ied from 2013 return	18a 18b 19 20				
Refund	<b>21</b> A	dd lines 18a through 20 line 21 is more than line 1	. These are your	total payments .			<ul><li>21</li><li>22</li></ul>		
Direct deposit? See	b R d A e If	amount of line 22 you want Routing number account number you want your refund hown above, enter that	check mailed to	c Type:	Che	cking Savin			
instructions.	 24 Ā	mount of line 22 you want a	pplied to your 201	5 estimated tax 🕨	24				
Amount You Owe		mount you owe. Subtract stimated tax penalty (see			to pay, s   <b>26</b>	see instructions	25		
Third Party Designee	Designee	vant to allow another person 's	to discuss this retu	Phone	structior	Personal ic	dentification	e following. 🗌 No	
Sign Here	name Under pe and belie	nalties of perjury, I declare that f, they are true, correct, and (other than taxpayer) is based of the than taxpayer)	accurately list all am	nounts and sources of L	J.S. sourd	ce income I receive	nts, and to t	the best of my knowledge e tax year. Declaration of	
Keep a copy of this return for your records.	You	r signature	D	Date Your occu	pation in	the United States	If the IRS se PIN, enter in here (see in		
Paid Preparer	Print/Type p	preparer's name	Preparer's signa	ature	[	Date	· · · · _	if PTIN	
Use Only	Firm's name Firm's addre					Firm's EIN ► Phone no.			

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

Cat. No. 21534N

## Schedule OI- Other Information (see instructions)

A	Of what country or countries were you a citizen or national during the tax year?						
в	In what country did you claim residence for tax purposes during the tax year?						
с	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?						
D	Were you ever: 1. A U.S. citizen?						
F	status on the last day of th		tatua) or II S. immigration atotus?				
Г	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?						
G	List all dates you entered and left the United States during 2014 (see instructions).     Note. If you are 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						
	mm/dd/yy	mm/dd/yy	mm/dd/yy	mm/dd/yy			
н			s, and partial days) you were present , and 2014	in the United States during:			
I		tax return for any prior year' ar and form number you fileo		🗌 Yes 🗌 No			
J		-If you are claiming exempt See Pub. 901 for more info		come tax treaty with a foreign country,			
			tax treaty article, the number of me in the columns below. Attach Form 8	onths in prior years you claimed the 3833 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		
e) Total. Enter this amount on Form 1040NR-EZ, line 6. Do not enter it on line 3 or line 5					
2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above?					
			Form <b>1040NR-EZ</b> (2014)		

	a Employee's social security number	OMB No. 1545	5-0008	Safe, accurate, FAST! Use	Visit the IRS website at www.irs.gov/efile
<b>b</b> Employer identification number	(EIN)		1 Wa	ges, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and	ZIP code		<b>3</b> So	cial security wages	4 Social security tax withheld
			5 Me	edicare wages and tips	6 Medicare tax withheld
			7 So	cial security tips	8 Allocated tips
d Control number			9		10 Dependent care benefits
e Employee's first name and initia	I Last name	Suff.	11 No	onqualified plans	<b>12a</b> See instructions for box 12
			13 Sta em	tutory Retirement Third-party ployee plan sick pay	12b
			14 Oth	 ner	12c
					Ted C C C
f Employee's address and ZIP cod15 StateEmployer's state ID num		17 State incon	ne tax	<b>18</b> Local wages, tips, etc.	19 Local income tax         20 Locality name
<u> </u>					
Form <b>W-2</b> Wage and Stateme	nd Tax – nt C	20 l r	ł	Department o	f the Treasury—Internal Revenue Service

## Copy B—To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.