Department of the Treasury—Internal Revenue Service

IRS Use Only—Do not write

		U.S. Nonresident	Allen in	come rax	Return			OMB No. 1	1545-0074	4 o	or staple in th	is space.	
Filing Status		Single Married filing sepa	• •	, ,	ried)	Qualify	ing wido	w(er) (QW)					
Check only one box.		rou checked the QW box, enter the child's name if the alifying person is a child but not your dependent ▶											
Your first name and middle initial										our identifying number see instructions)			
DHRUV				IRA					721	721-25-0617			
Home address (ı	numb	per and street or rural route). If you	ı have a P.0	D. box, see inst	ructions.		,	Apt. no.	Chec	k if:	X Individ	dual	
19 CLIFF :											Estate	or Trust	
		ce. If you have a foreign address, als	so complete	complete spaces below. State ZIP code									
JERSEY CITY				NJ 07306									
Foreign country	name	e	Foreign pr	ovince/state/co	ounty		Foreign	postal code	9	◥			
												•	
At any time durir	ng 20	20, did you receive, sell, send, ex	change, or	otherwise acqu	uire any fina	ancial in	terest in a	any virtual o	currency		∐ Yes	X No	
Dependents						4.1			4) ✓ if qu	ualifie	es for (see	instr.):	
(see instructions):		(1) First name Last na	ame	(2) Dependent's identifying number (3) Dependent relationship to				nild tax cr	edit		or other ndents		
f more than four					-4						 		
dependents, see								· ·				<u> </u>	
nstructions and check here ►											+	<u>-</u> -	
Income	1a	Wages, salaries, tips, etc. Attach	Form(s) W	-2			. .		. 1	la	6	 ,650.	
Effectively	b	Scholarship and fellowship grant					ent. See i	nstructions	_	lb		,	
Connected	С												
With U.S.		L, line 1(e)											
Trade or	2a	Tax-exempt interest	2a		b Taxable interestb Ordinary dividends					2b			
Business	3a	Qualified dividends	3a						. 3	3b			
	4a	IRA distributions							lb				
	5a Pensions and annuities 5a b Taxable amount							5b					
	 Reserved for future use							_	6		21		
	 7 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required. 8 Other income from Schedule 1 (Form 1040), line 9 9 Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively contributed in the state of the									7 8		21.	
											6	,671.	
1	10	Adjustments to income:	1, and 0. 11	ino io your tota	CHOOLIVO			onic		9		70711	
	а	From Schedule 1 (Form 1040), lin	ne 22				10a						
	b	· · · · · · · · · · · · · · · · · · ·		residents of India. See instructions . 10b excluded									
	С	Scholarship and fellowship grant	ts excluded										
	d	Add lines 10a through 10c. These are your total adjustments to income							1	0d			
1	11 Subtract line 10d from line 9. This is your adjusted gross income .										6	,671.	
1	12	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
		deduction. See instructions				1	1	ala Tre	aty 1	12	12	,400.	
1	13a	Qualified business income deduc					13a						
	b	Exemptions for estates and trust	•			_	13b			2-			
	C 14	Add lines 13a and 13b Add lines 12 and 13c								3c	1 2	400	

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-

BAA

0.

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Form 1040-NR (2020)									Page 2
	16	Tax (see instructions). Check if any from Form(s): 1 88	314 2 [4972	3 🗌		16		0.
	17	Amount from Schedule 2 (Form 1040), line 3						17		0.
	18	Add lines 16 and 17						18		0.
	19	Child tax credit or credit for other dependent	s					19		
	20	Amount from Schedule 3 (Form 1040), line 7						20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. If zero or less, e	enter -0					22		0.
	23a	Tax on income not effectively connected w from Schedule NEC (Form 1040-NR), line 15				За				
	b	Other taxes, including self-employment tax, line 10	from Schedule	e 2 (Form 1	040),	3b				
	С	Transportation tax (see instructions)				3c				
	d	Add lines 23a through 23c						23d		
	24	Add lines 22 and 23d. This is your total tax						24	/	0.
	25	Federal income tax withheld from:							*	
	а	Form(s) W-2			2	5a	299.			
	b	Form(s) 1099				5b	7			
	С	Other forms (see instructions)				ōc .	7			
	d	Add lines 25a through 25c						25d		299.
	е	Form(s) 8805						25e		
	f	Form(s) 8288-A						25f		
	g	Form(s) 1042-S						25g		
	26	2020 estimated tax payments and amount ap				·		26		
	27	Reserved for future use		7		7				
	28	Additional child tax credit. Attach Schedule 8				8				
	29	Credit for amount paid with Form 1040-C			. 2	9				
	30	Reserved for future use			. 3	0				
	31	Amount from Schedule 3 (Form 1040), line 13	3		. 3	1				
	32	Add lines 28 through 31. These are your tota	l other payme	ents and re	efundable	credits	. ▶	32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The	se are your to	tal payme	nts		. ▶	33		299.
Refund	34	If line 33 is more than line 24, subtract line 24	from line 33.	This is the	amount y	ou overpaid		34		299.
	35a	Amount of line 34 you want refunded to you	. If Form 8888	is attached	d, check h	ere		35a		299.
Direct deposit?	▶b	Routing number 0 2 1 2 0 0 3	3 9	▶ c Type	: 🗵 Ch	ecking \Box	Savings			
See instructions.	▶ d	Account number 3 8 1 0 6 0 0	7 5 4	6 4						
	► e	e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.								
	36	Amount of line 34 you want applied to your	2021 estimate	ed tax .	▶ 3	6				
Amount	37	Amount you owe. Subtract line 33 from line					. ▶	37		
You Owe	38				· • 1	8				
Third Party Designee	Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions									
(Other than	Desig	nee's	Phone			Doroca	nal identifi	cation		
paid preparer)	name	▶	no.				er (PIN)			
Sign	Under belief,	penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of p	his return and a preparer (other th	accompanyin nan taxpayer	g schedule) is based o	s and statemen	ts, and to	the best preparer	of my know has any kno	ledge and owledge.
Here	Your	Your signature Date Your occupation If the							nt you an le	,
	Prote					IN, enter it	here			
					ALYST-	HEALTHCAR	E (see	inst.) ▶		
	Phone		Email address	S	1.5	oto	DTINI	Т	Object 1915	
Paid		rer's name Preparer's sig		OIIDE: ==		ate	PTIN		Check if:	انجنوامم
Preparer Use Only	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/27/2021 P02082							mployed		
								78)965 <u>-</u>		
		address ► 2530 Pebble Creek Li		g GA 30					0-10171	
GO TO WWW.Irs.	gov/Foi	m1040NR for instructions and the latest informat	1011.			REV 04/16/21 PR	0	Fo	rm 1040-N	vr (2020)