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

Submi	ission Identification Number (SID)						
Taxpaye	er's name	Social secur	ity num	ber			
MADI	HURIKA AILA	777-77	-873	7			
Spouse	's name	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2021 (En	ter year you	are au	thorizing	1)		
	whole dollars only on lines 1 through 5.	itor your your	arc au	trionzing	1.)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1 1	69	9,313.		
2	Total tax		2		3,173.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	I	9,043.		
4	Amount you want refunded to you		4		870.		
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a cop	y of y	our retu	ırn)		
return (to send for any Agent t paymer authori paymer busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trard my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account not of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended)	smitter, or electric rejection of the e U.S. Treasury a indicated in the aution to debit the aute the authorizequests must be the processing of e payment. I fu	ronic re transmitand its tax preperently cation. The receing the electron	turn original ssion, (b) to designate operation so to this according for evoke ived no late the thing possible of the thing possible	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the		
	onic Funds Withdrawal Consent. Ayer's PIN: check one box only						
X		ite my PIN	' 8 '	7 3 7	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ei		digits, but er all zeros	do my		
	I will enter my PIN as my signature on the income tax return (original or amended) I ar if you are entering your own PIN and your return is filed using the Practitioner PIN m below.						
Your s	signature A. Madhurika	03/24/2022					
Spous	se's PIN: check one box only				ı		
	I authorize to enter or genera	ite mv PIN			as my		
	ERO firm name	E		digits, but			
	signature on the income tax return (original or amended) I am now authorizing.	de	on't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I ar if you are entering your own PIN and your return is filed using the Practitioner PIN m below.						
Spous	se's signature ▶ Date ▶	•					
	Practitioner PIN Method Returns Only—continue bel	ow					
Part	III Certification and Authentication — Practitioner PIN Method Only						
ERO's	S EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	8 7 2 7 Don't en	8 6		3 9		
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incomized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method Pub. 1345, Handbook for	e tax return (origibmitting this ref	ginal or curn in a	amended) accordance			
ERO's	s signature ▶ Date ▶	<u> </u>					
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested T	o Do So					

Department of the Treasury – Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return 2021 OMB No. 1545-0074 IRS Use Only – Do not write or staple in this space.

														_
Filing Status		Single Married filing s	•	•	,	Qualifyir	ng widov	v(er) (QV	V)					
Check only one box.	, ,	ou checked the QW box, enter the alifying person is a child but not you												
Your first name	and n	niddle initial	La	ast nar	ne							Your identifying number (see instructions)		
MADHURIKA			A.	ILA							777-	77	-8737	
Home address (i	numb	per and street or rural route). If you	have a	a P.O.	box, see inst	uctions.			Apt. no).	Check i	f: [X Individual	_
9920 BONI	TA :	LN							520				Estate or Trus	st
City, town, or pos	st offi	ce. If you have a foreign address, als	so com	plete s	paces below.	State		ZIP co	de					
CHARLOTTE						NC		2826	2					
Foreign country	name	е	Foreig	ın prov	vince/state/co	unty		Foreig	n postal	code				
At any time durir	ng 20	21, did you receive, sell, exchang	e, or ot	therwi	se dispose of	any finano	cial inter	est in ar	ny virtual	currer	ncy?		Yes X No	,
	ı													_
Dependents					(2) Depend	ant's	(3) [Depende	nt'e	(4)	if qua	lifies	s for (see inst.):	
(see instructions):		(1) First name Last na	me		identifying n			onship to		Chilo	I tax cred	lit	Credit for other dependents	
								•			П			-
f more than four											$\overline{\sqcap}$			_
dependents, see											$\overline{\sqcap}$			_
check here ►											$\overline{\Box}$			_
Income	1a	Wages, salaries, tips, etc. Attach	Form(s	s) W-2)						1a	Τ	71,554.	_
Effectively	b	Scholarship and fellowship grant	s. Atta	ch For	m(s) 1042-S	r required	d statem	ent. See	instruct	ions .	1b			
Connected	С	Total income exempt by a treaty	from	Sched	dule OI (Form	1040-NR)	. Item							
With U.S.		L, line 1(e)						1c						
Trade or	2a	Tax-exempt interest	2a			b Tax	able inte	rest .			2b	1		
Business	3a	Qualified dividends	3a			b Ord	linary div	ridends			3b			
	4a	IRA distributions	4a			b Tax	able am	ount .			4b			
	5a	Pensions and annuities	5a			b Tax	able am	ount .			5b			
	6	Reserved for future use									6			
	7	Capital gain or (loss). Attach Sch	edule [) (For	m 1040) if req	uired. If no	ot require	ed, chec	ck here .	▶ [7			
	8	Other income from Schedule 1 (F	orm 10	040), li	ine 10						8			
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b,	7, and	8. Thi	s is your total	effective	ly conn	ected in	come .	. •	9	┸	71,554.	
-	10	Adjustments to income:												
	а	From Schedule 1 (Form 1040), lin	ne 26 .					10a	2	2,241				
	b	Reserved for future use						10b						
	С	Scholarship and fellowship grant	s exclu	ıded				10c						
	d	Add lines 10a and 10c. These are	e your t	total a	idjustments t	o income				.)	▶ 10d	<u> </u>	2,241.	
1	11	Subtract line 10d from line 9. Thi	s is you	ur adj i	usted gross i	ncome				. •	11	_	69,313.	_
•	12a	Itemized deductions (from Schresidents of India, standard dedu						12a	12	2,55	o.			
	b	Charitable contributions for certa	in resid	dents o	of India. See ir	structions	s . [12b		30	0.			
	С	Add lines 12a and 12b									12c	:	12,850.	
-	13a	Qualified business income deduc	ction fro	om Fo	rm 8995 or Fo	rm 8995-	Α.	13a						
	b	Exemptions for estates and trust	s only.	See ir	nstructions .		[13b						
	С										13c	:		
•	14	Add lines 12c and 13c									14		12,850.	

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

BAA

56,463.

Form 1040-NR (2021)											Page 2
	16	Tax (see instructions). Check if a	any from Form	(s): 1 🗌 8	814 2 [4972	2 3			16		3,173.
	17	Amount from Schedule 2 (Form	n 1040), line 3							17		0.
	18	Add lines 16 and 17								18		3,173.
	19	Nonrefundable child tax credit	or credit for o	ther depende	ents from Sc	hedule 8	8812 (Fo	rm 104	0)	19		
	20	Amount from Schedule 3 (Form	n 1040), line 8							20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If	zero or less,	enter -0						22		<u>3,173.</u>
	23a	Tax on income not effectively from Schedule NEC (Form 104					23a					
	b	Other taxes, including self-empline 21			•	, ·	23b					
	С	Transportation tax (see instruct	tions)			. [23c					
	d	Add lines 23a through 23c .								23d		
	24	Add lines 22 and 23d. This is y	our total tax							24	3	3,173.
	25	Federal income tax withheld from	om:									
	а	Form(s) W-2				. [25a	Ş	0,043.			
	b	Form(s) 1099				. [25b					
	С	Other forms (see instructions)				. [25c					
	d	Add lines 25a through 25c .								25d		0,043.
	е	Form(s) 8805								25e		
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2021 estimated tax payments a	and amount a	pplied from 2	020 return .					26		
	27	Reserved for future use					27					
	28	Refundable child tax credit of 8812 (Form 1040)	additional c				28					
	29	Credit for amount paid with Fo	rm 1040-C			. [29					
	30	Reserved for future use				. [30					
	31	Amount from Schedule 3 (Form	n 1040), line 1	5		. [31					
	32	Add lines 28, 29, and 31. These	e are your tot a	al other payn	nents and r	efundal	ole crec	lits	. ▶	32		
	33	Add lines 25d, 25e, 25f, 25g, 2	6, and 32. The	ese are your t	otal payme	nts .				33	Ç	0,043.
Refund	34	If line 33 is more than line 24, s	ubtract line 2	4 from line 33	. This is the	amount	t you ov	erpaid		34		870.
	35a	Amount of line 34 you want ref			8 is attache	d, check	k here			35a		870.
Direct deposit?	▶b	Routing number 0 8 1			▶ c Type	e: 🔀 (Checkin	g _. \square	Savings			
See instructions.	▶ d	Account number 3 5 5	0 1 0 7	7 4 7 0	4 0							
	▶ e	If you want your refund check enter it here.					s not sh	own on	page 1,			
	36	Amount of line 34 you want ap	plied to your	2022 estima	ted tax .	>	36					
Amount	37	Amount you owe. Subtract lin	e 33 from line	24. For detai	ls on how to	pay, se	e instru	ctions	. ▶	37		
You Owe	38	Estimated tax penalty (see inst	ructions) .			>	38					
Third Party Designee	Con instructions										⊠ No)
Ü	Desig name			Phone no. ▶					nal identifi er (PIN)	cation	$\neg \neg$	\top
Sign		penalties of perjury, I declare that I they are true, correct, and complete.										
Here	Your	signature		Date	Your occu	upation					ent you an	,
	N. M. Alausik							l l		PIN, enter i	t here	
	7			03/24/2022	10011111	ARE DI	EVELO	PER	(see i	inst.) ▶		
	Phone		<u> </u>	Email addre	ss	1	D :		DT::	-		
Paid		rer's name	Preparer's sig	0			Date		PTIN		Check if:	
Preparer	SYAM I	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAF	R GUPTA TA	ALLAM	03/24	/2022	P02082	2703	Self-e	employed
Use Only		name ► GLOBAL TAXES									78)965	
200 2 111y	Firm's	address ► 2530 Pebble	Creek L	n Cummin	ng GA 30	041			Firm's E	IN ► 3	0 - 1017	196

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

MADHURIKA AILA

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 777-77-8737

	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	1	
2 a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tre Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k		8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z	<u> </u>	9	
0	Combine lines 1 through 7 and 9. Enter here and on Form 1040-NR, line 8		10	

Schedule 1 (Form 1040) 2021 Page **2**

Par	t II Adjustments to Income		
1	Educator expenses	11	
2	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
3	Health savings account deduction. Attach Form 8889	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
5	Deductible part of self-employment tax. Attach Schedule SE	15	
6	Self-employed SEP, SIMPLE, and qualified plans	16	
7	Self-employed health insurance deduction	17	
8	Penalty on early withdrawal of savings	18	
9a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
20	IRA deduction	20	
21	Student loan interest deduction	21	2,241.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
Z	Other adjustments. List type and amount ▶		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	2 241

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

2021
Attachment Sequence No. 7B

Name shown on Form 1040-NR Your identifying number MADHURIKA AILA 777-77-8737 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
	Nature of income		(a) 10%	(b) 13%	(6) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	Gambling winnings—Residents of countries other than Canada.	100					
	Note: Losses not allowed	11					
12	Other (specify) ▶						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add column					R, line 23a ► 15	
	Capital Gains and Losses F	rom	Sales or Excha	nges of Proper	ty		
losses f exchang within t	nly the capital gains and rom property sales or ges that are from sources the United States and not the capital gains and comproperty sales or ges that are from sources the United States and not the capital gains and growing the capital gains and		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S. s. Do not include a gain						
or loss	on disposing of a U.S. real y interest; report these						
gains a	nd losses on Schedule D						
(Form 1	040). property sales or						
exchan	ges that are effectively						
						<u>(</u>)	
	18 Capital gain. Combine columns (f) and (g) of line 17	. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 ▶ 18	

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

d the latest information.

2021

Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040-NR.
► Answer all questions.

Name sl	hown on Form 1040-NR				Your identifying	number					
MADE	IURIKA AILA				777-77-87	37					
Α	Of what country or countries w	vere you a citizen or nationa	al during the tax year?	P INDIA							
В	In what country did you claim	residence for tax purpose	s during the tax year?	United States							
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) of	the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1.	A U.S. citizen?					☐ Yes	⊠ No				
2.	A green card holder (lawful per	rmanent resident) of the Ur	nited 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 of immigration status on the last of	iter your U.S.									
F	Have you ever changed your v	on status?		☐ Yes	⊠ No						
	If you answered "Yes," indicate	e the date and nature of the	e change ►								
G	List all dates you entered and		•								
	Note: If you are a resident of C check the box for Canada or				lent intervals, ☐ Mexico						
	Date entered United States	Date departed United Stat	es Da	ate entered United State	s Date depar	ted United	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	m/dd/yy					
Н	Give number of days (including 2019										
I	Did you file a U.S. income tax	return for any prior year?.				X Yes	☐ No				
	If "Yes," give the latest year ar	nd form number you filed >	104	40NR		_	_				
J	Are you filing a return for a trus					Yes	⊠ No				
	If "Yes," did the trust have a U.S. person, or receive a contr					☐ Yes	□No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax year? .			☐ Yes	⊠ No				
	If "Yes," did you use an alterna	ative method to determine	the source of this com	npensation?		☐ Yes	☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign	country,				
1.	Enter the name of the country, amount of exempt income in the				claimed the trea	aty benefi	t, and the				
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month		ount of exe					
	(e) Total. Enter this amount of	n Form 1040-NR, line 1c. D	o not enter it on line	1a or line 1b	>						
2.	Were you subject to tax in a fo	reign country on any of the	e income shown in 1(d	l) above?		☐ Yes	☐ No				
3.	Are you claiming treaty benefit	s pursuant to a Competent	t Authority determinat	ion?		☐ Yes	⊠ No				
	If "Yes," attach a copy of the C	Competent Authority deterr	nination letter to your	return.							
M	Check the applicable box if:										
1.	This is the first year you are may with a U.S. trade or business u						onnected				
2.	with a U.S. trade or business under section 871(d). See instructions										