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 | Social securit | y numbe | er | | | | | |
| SONIYA TANWANI | 780-15- | 780-15-2286 | | | | | | |
| Spouse's name | Spouse's soci | e's social security number | | | | | | |
| Part I Tax Return Information — Tax Year Ending December 31, 2021 (En | ter year you a | re autl | horizing | .) | | | | |
| 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 | | ,018. | | | | |
| 2 Total tax | | 2 | | ,747. | | | | |
| Federal income tax withheld from Form(s) W-2 and Form(s) 1099 Amount you want refunded to you | | 3 | | ,982. | | | | |
| 5 Amount you want retained to you | | 5 | | ,235. | | | | |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get and | d keep a copy | _ | our retu | ırn) | | | | |
| my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for it for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account i payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rubusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) | smitter, or electrorejection of the trace U.S. Treasury andicated in the faution to debit the authorizate the authorizate the processing of a payment. I furt | enic returnismissed its de la preparent to entry the ele her ack | urn origina sion, (b) the esignated aration so this acco revoke (ed no late actronic pa knowledge | tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the | | | | |
| Electronic Funds Withdrawal Consent. | | | | | | | | |
| Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or general | 5 | 2 2 | 8 6 | 00 mv | | | | |
| ERO firm name signature on the income tax return (original or amended) I am now authorizing. | ř Ent | | ligits, but all zeros | as my | | | | |
| I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below. | | | | | | | | |
| Your signature ▶ Date ▶ | | | | | | | | |
| Spouse's PIN: check one box only | | | | | | | | |
| I authorize to enter or general | te mv PIN | | | as my | | | | |
| ERO firm name | Ent | | ligits, but | , | | | | |
| signature on the income tax return (original or amended) I am now authorizing. | | | all zeros | | | | | |
| I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below. | | | | | | | | |
| Spouse's signature ▶ Date ▶ | | | | | | | | |
| Practitioner PIN Method Returns Only—continue belo | w | | | | | | | |
| 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 | 8 6 | 1 9 8 | 9 | | | | |
| | | | | | | | | |
| I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sul requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practition PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbo | bmitting this retu | rn in ad | ccordance | | | | | |
| ERO's signature ▶ Date ▶ | | | | | | | | |
| ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To | n Do So | | | | | | | |

Department of the Treasury—Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return

Department of the Treasury—Internal Revenue Service (99)

OMB No. 1545-0074

RS Use Only—Do not write or staple in this space.

| | 0.0. | i toili oolaoiit | /\li\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | ioonic rax | Itotaii | • | | CIVID | 140. 10- | 0074 | or stapic in | ина эрасс. | |
|------------------------------|-------------------------|---|---|--------------------------|--------------|-----------------|----------|-------------|----------|------------|--------------|------------------|--|
| Filing Status | | ☐ Married filing | | . , _ | Qualifyir | ng widow | (er) (QV | /) | | • | | | |
| Check only one box. | • | u checked the QW box, enter the child's name if the liftying person is a child but not your dependent ▶ | | | | | | | | | | | |
| | and middle initial | | Last | name | | | | | | Your ide | ntifying n | umber | |
| | | | | | | | | | | (see inst | | | |
| SONIYA | | | TAN | WANI | | | | | | 780-1 | 15-228 | б | |
| Home address (r | number and street o | or rural route). If yo | u have a P | .O. box, see inst | ructions. | | | Apt. no | ٠. | Check if: | X Indiv | /idual | |
| 9000 VANTA | AGE DRIVE | | | | | | | 735 | | | Esta | te or Trust | |
| City, town, or pos | t office. If you have a | a foreign address, a | lso complet | e spaces below. | State | | ZIP cod | le | | | | | |
| DALLAS | | | | | TX | | 75243 | 3 | | | | | |
| Foreign country | name | | Foreign p | province/state/co | ounty | | Foreign | postal | code | | | | |
| | | | | | | | | | | | | | |
| At any time durir | ng 2021, did you red | ceive, sell, exchan | ge, or othe | rwise dispose of | any finano | cial intere | st in an | y virtual | currer | icy? | ☐ Yes | ⊠ No | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Dependents | | | | | | | | | (4) | ✓ if quali | fies for (se | e inst.): | |
| see instructions): | (4) First | (1) = | | | dent's | | epender | | | tax credi | Credit | Credit for other | |
| - | (1) First nan | ne Last n | ame | identifying r | lumber | relatio | nship to | you | | | dep | endents | |
| f more than four | | | | | | | | | | \vdash | | | |
| dependents, see | | | | | | | | | | \dashv | | | |
| nstructions and check here ► | | | | | | | | | | \vdash | | | |
| Income | 1a Wages, salari | es, tips, etc. Attac | h Form(s) V | V-2 | | | | | | 1a | 9 | <u> </u> | |
| Effectively | • | and fellowship gran | ` ' | | | | | | ions | | | 3,010. | |
| Connected | | exempt by a trea | | . , | • | 1 | | ii ioti doi | | 15 | | | |
| With U.S. | | | | iedule Of (Form | | , | 1c | | | | | | |
| Trade or | | nterest | 2a | | b Tax | ∟ able inte: | | | | 2b | | | |
| Business | • | dends | 3a | | b Ord | dinary divi | idends | | | 3b | | | |
| | 4a IRA distribution | ons | 4a | | b Tax | able amo | ount . | | | 4b | | | |
| | 5a Pensions and | annuities | 5a | | b Tax | able amo | ount . | | | 5b | | | |
| | 6 Reserved for | Reserved for future use | | | | | | | | 6 | | | |
| | 7 Capital gain o | Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here . | | | | | | | | 7 | | | |
| | 8 Other income | Other income from Schedule 1 (Form 1040), line 10 | | | | | | | | 8 | _ | 9,000. | |
| | 9 Add lines 1a, | 1b, 2b, 3b, 4b, 5b | , 7, and 8. | This is your tota | l effective | ly conne | ctedin | come . | | 9 | 8 | 1,018. | |
| 1 | O Adjustments t | | | | | | | | | | | | |
| | | le 1 (Form 1040), I | | | | | 10a | | | _ | | | |
| | | future use | | | | - | 10b | | | | | | |
| | • | ınd fellowship grar | | | | _ | 10c | | | | ļ | | |
| _ | | and 10c. These a | , | • | | | | | . ! | 10d | | | |
| | | 10d from line 9. Th | • | • | | | · . | | . • | 11 | 8 | 1,018. | |
| 1 | | ductions (from Sondia, standard dec | | | | | 12a | 12 | 2,550 | | | | |
| | | ntributions for cert | ain residen | ts of India. See i | nstructions | s . | 12b | | 300 | 0. | | | |
| | c Add lines 12a | | | | | | | | | 12c | 1 | 2,850. | |
| 1 | | Qualified business income deduction from Form 8995 or Form 8995-A . 13a | | | | | | | | | | | |
| | | or estates and trus | | | | L | 13b | | | | | | |
| | c Add lines 13a | | | | | | | | | 13c | | | |
| 1 | 4 Add lines 12c | and 13c | | | | | | | | 14 | 1 | 2,850. | |

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

68,168.

15

| Form 1040-NR (2 | 2021) | | | | | | | | | | | Page 2 |
|-------------------------|---------------|---|-----------------------|------------------------|-----------------|------------|-------------|-------------|--------------------------|----------|---------------|---------------|
| | 16 | Tax (see instructions). Check if | any from Form | (s): 1 88 | 314 2 [| 497 | 2 3 | | | 16 | 10 | 747. |
| | 17 | Amount from Schedule 2 (Form | n 1040), line 3 | | | | | | | 17 | | 0. |
| | 18 | Add lines 16 and 17 | | | | | | | | 18 | 10 | ,747. |
| | 19 | Nonrefundable child tax credit | or credit for o | ther depender | nts from Scl | hedule | 8812 (F | orm 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. I | f zero or less, | enter -0 | | | | | | 22 | 10 | 747. |
| | 23a | Tax on income not effectively from Schedule NEC (Form 104 | | | | | 23a | | | | | |
| | b | Other taxes, including self-emline 21 | | | • | , , | 23b | | | | | |
| | С | Transportation tax (see instruc | tions) | | | | 23c | | | | | |
| | d | Add lines 23a through 23c . | | | | | | | | 23d | | |
| | 24 | Add lines 22 and 23d. This is y | our total tax | | | | | | . ▶ | 24 | 10 | ,747. |
| | 25 | Federal income tax withheld fr | om: | | | | | | | | | |
| | а | Form(s) W-2 | | | | | 25a | 11 | ,982. | | | |
| | b | Form(s) 1099 | | | | | 25b | | | | | |
| | С | Other forms (see instructions) | | | | | 25c | | | | | |
| | d | Add lines 25a through 25c . | | | | | | | | 25d | 11 | ,982. |
| | е | Form(s) 8805 | | | | | | | | 25e | | |
| | f | Form(s) 8288-A | | | | | | | | 25f | | |
| | g | Form(s) 1042-S | | | | | | | | 25g | | |
| | 26 | 2021 estimated tax payments | and amount a | pplied from 20 | 20 return . | | | | | 26 | | |
| | 27 | Reserved for future use | | | | | 27 | | | | | |
| | 28 | Refundable child tax credit c 8812 (Form 1040) | r 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 | | | | | 31 | | | | | |
| | 32 | Add lines 28, 29, and 31. Thes | e are your tot | al other paym | ents and re | efunda | ble cre | dits | . ▶ | 32 | | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 2 | | | | | | | | 33 | 11 | ,982. |
| Refund | 34 | If line 33 is more than line 24, | | | | | | | | 34 | 1 | ,235. |
| | 35a | Amount of line 34 you want re | funded to you | J. If Form 8888 | 3 is attached | d, chec | k here | | ightharpoons | 35a | | ,235. |
| Direct deposit? | ▶b | Routing number 1 1 1 | 0 0 0 6 | 5 1 4 | ▶ c Type | : X | Checki | ng 🗌 | Savings | | | |
| See instructions. | ▶d | Account number 8 2 3 | 1 8 2 3 | 3 7 0 | | | | | - | | | |
| | ►e | | | | | | | | | | | |
| | 36 | Amount of line 34 you want ap | plied to your | 2022 estimat | ed tax . | • | 36 | | | - | | |
| Amount | 37 | Amount you owe. Subtract lir | ne 33 from line | 24. For detail | s on how to | pay, s | ee instr | uctions | . ▶ | 37 | | |
| You Owe | 38 | Estimated tax penalty (see ins | tructions) . | | | • | 38 | | | | | |
| Third Party Designee | • | rou want to allow another nstructions | person to di | scuss this r | eturn with | the I | RS? ▶ [| Yes. | Complete | below. | ⊠ No | , |
| Doolgilloo | Desig name | | | Phone no. ▶ | | | | | nal identifi er (PIN) | ication | | \Box |
| Sign | | penalties of perjury, I declare that I | have examined | | accompanyin | g sched | lules and | | ` , | the best | of my know | vledge and |
| Here | belief, | they are true, correct, and complete | . Declaration of | preparer (other t | han taxpayer |) is base | ed on all | informatio | n of which | prepare | r has any kn | owledge. |
| Here | Your | signature | | Date | Your occu | pation | | | | | ent you an l | , |
| | | | | | CODUCTA | DD D | NT (7 T NT) | 100 | | | PIN, enter it | t here |
| - | PI: | | | Face 10 10 | SOFTWA | .ㅈㅂ ㅂ. | MGTN | rrK | (See | inst.) ▶ | | |
| | Phone | | Preparer's si | Email addres | SS | | Doto | | PTIN | | Oh! 'f | |
| Paid | | arer's name | | - | a | | Date | . / 0 0 0 0 | | 0000 | Check if: | ادحدعامم |
| Preparer | | PRIYA RAM SAGAR GUPTA TALLAM | | A KAM SAGAR | GUPTA TA | ALLAM | U4/15 | 5/2022 | P0208 | | | employed |
| Use Only | | s name ► GLOBAL TAXES | | | | 0.4.5 | | | | | 78)965- | |
| , | ⊢ırm's | saddress ► 2530 Debbla | Creek I | n Cummin | ∝ ር፮ ፯በ | () 4 1 | | | ⊩irm′s F | -IIV ▶ 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

SONIYA TANWANI

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 780-15-2286

| Par | t I 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, tro | • | 5 | -9,000. |
| 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 k | Stock options | 8j 8k | _ | |
| ı | 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 | | 9 | |
| 10 | Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8 | | 10 | -9,000. |

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

| Par | Adjustments to Income | | | |
|-----|--|-------------|-----|--|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106 | | | |
| 13 | Health savings account deduction. Attach Form 8889 | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form | 3903 | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | 15 | | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | 16 | |
| 17 | Self-employed health insurance deduction | | 17 | |
| 18 | Penalty on early withdrawal of savings | | 18 | |
| 19a | 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 | |
| 22 | Reserved for future use | | 22 | |
| 23 | Archer MSA deduction | | 23 | |
| 24 | Other adjustments: | | | |
| а | Jury duty pay (see instructions) | 24a | | |
| 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 | 24d | | |
| е | Repayment of supplemental unemployment benefits under the Trade Act of 1974 | 24e | | |
| f | Contributions to section 501(c)(18)(D) pension plans | 24f | | |
| g | Contributions by certain chaplains to section 403(b) plans | 24 g | | |
| h | , | 24h | | |
| 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 | 24i | | |
| j | Housing deduction from Form 2555 | 24 j | | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) | 24k | | |
| z | Other adjustments. List type and amount ▶ | 24z | | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line | | | |

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 (99)

Name shown on Form 1040-NR

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

Sequence No. 7B

Your identifying number

SONIYA TANWANI 780-15-2286 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) (a) 10% **Nature of Income** (c) 30% **(b)** 15% % % 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 3 4 Motion picture or TV copyright royalties Other royalties (copyrights, recording, publishing, etc.) . . . 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 Gambling winnings—Residents of countries other than Canada. 11 12 Other (specify) ▶ 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 15 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 ▶ Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (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 17 Add columns (f) and (g) of line 16 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 (99) **Other Information**

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

► Attach to Form 1040-NR.

► Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C**

| | SHOWIT OF TO | | | | rour identifying | | |
|-----|--|----------------------|----------------|---|------------------|-----------------------------|-----------|
| SOI | NIYA TANWANI | | | | 780-15-2 | 286 | |
| Α | Of what country or countries were you a citizen or | _ | - | | | | |
| В | In what country did you claim residence for tax pu | | • | | | | |
| С | Have you ever applied to be a green card holder (la | awful permanent re | esident) of | the United States? . | | ☐ Yes | ⊠ No |
| D | Were you ever: | | | | | | |
| 1 | . A U.S. citizen? | | | | | Yes | ⊠ No |
| 2 | . A green card holder (lawful permanent resident) of | the United States? | | | | Yes | ⊠ No |
| | If you answer "Yes" to (1) or (2), see Pub. 519, chap | oter 4, for expatria | tion rules t | hat apply to you. | | | |
| E | If you had a visa on the last day of the tax year, a immigration status on the last day of the tax year. | m1 | • | id not have a visa, en | • | | |
| F | Have you ever changed your visa type (nonimmigra | ant status) or U.S. | immigratio | n status? | | ☐ Yes | ⊠ No |
| | If you answered "Yes," indicate the date and nature | e of the change | _ | | | | |
| G | List all dates you entered and left the United States | during 2021. See | | | | | |
| | Note: If you are a resident of Canada or Mexico A | ND commute to w | ork in the | United States at freque | ent intervals, | | |
| | check the box for Canada or Mexico and skip to | | | | Mexico | | |
| | Date entered United States | | | | | arted Unite | d States |
| | mm/dd/yy mm/dd/yy | | | mm/dd/yy | r | nm/dd/yy | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Н | Give number of days (including vacation, nonworkda | ys, and partial days | s) you were | present in the United S | States during: | | <u>.</u> |
| | 2019, 2020 | | | | | | |
| ı | Did you file a U.S. income tax return for any prior y | ear? | | | | X Yes | ☐ No |
| | If "Yes," give the latest year and form number you | | | | | | |
| J | Are you filing a return for a trust? | | | | | ☐ Yes | ⊠ No |
| | If "Yes," did the trust have a U.S. or foreign owne U.S. person, or receive a contribution from a U.S. | r under the granto | r trust rule | es, make a distribution | or loan to a | ☐ Yes | □No |
| K | Did you receive total compensation of \$250,000 or | | | | | Yes | ⊠ No |
| •• | If "Yes," did you use an alternative method to dete | | - | | | ☐ Yes | □No |
| L | Income Exempt From Tax—If you are claiming e. | | | • | | | _ |
| | complete (1) through (3) below. See Pub. 901 for m | ore information or | n tax treation | es. | · | | |
| 1 | Enter the name of the country, the applicable tax tre amount of exempt income in the columns below. At | tach Form 8833 if r | equired. Se | | | | |
| | (a) Country | (b) Tax tre | aty article | (c) Number of month claimed in prior tax year | | ount of exe n current to | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Total. Enter this amount on Form 1040-NR, line | e 1c. Do not enter | it on line 1 | a or line 1b | > | | |
| | . Were you subject to tax in a foreign country on any | | | | | ☐ Yes | ☐ No |
| 3 | Are you claiming treaty benefits pursuant to a Com | | | | | ☐ Yes | ⊠ No |
| | If "Yes," attach a copy of the Competent Authority | determination lette | er to your r | eturn. | | | |
| М | Check the applicable box if: | | | | | | |
| 1 | This is the first year you are making an election to a with a U.S. trade or business under section 871(d). | | | | | | onnected. |
| 2 | You have made an election in a previous year the | at has not been re | evoked, to | treat income from re | | | ne United |

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074

2021

Attachment Sequence No. 13

Name(s) shown on return SONIYA TANWANI

Department of the Treasury Internal Revenue Service (99)

Your social security number

| SONI | YA TANWANI | | | | | | | 78 | 80-15-2 | 2286 |) |
|-----------|------------------------------------|--|--------------|------------|---------|-----------|----------------|------|-----------|------|---------|
| Part | | s From Rental Real Estate and Roy | | | - | | | | | | |
| | | instructions. If you are an individual, repo | | | | | | | | | |
| | | nts in 2021 that would require you to | | | | | | | | | |
| B If " | | ou file required Form(s) 1099? | | | | | | | | Y | es 🗌 No |
| <u>1a</u> | Physical address of | each property (street, city, state, ZIP | code | e) | | | | | | | |
| A | | | | | | | | | | | |
| В | | | | | | | | | | | |
| C | T (D | | | | | Fair | Dontol | Day | rsonal Us | _ | |
| 1b | Type of Property (from list below) | For each rental real estate propabove, report the number of fai | ir rent | al and | | | Rental Days | Per | Days | e | QJV |
| Α | | personal use days. Check the (| QJV b | ox only | | _ | 365 | | 0 | | |
| | 3 | if you meet the requirements to file as a qualified joint venture. See instructions. | | | A B | | 303 | | 0 | | |
| C | | | | | C | | | | | | |
| | of Property: | | | | | | | | | | |
| | gle Family Residence | 3 Vacation/Short-Term Rental | 5 La | nd | | 7 Self- | Rental | | | | |
| | ti-Family Residence | | | valties | | | r (describe) |) | | | |
| Incom | | Properties: | | ĺ | Α | | E | | | | С |
| 3 | Rents received | | 3 | | | 600. | | | | | |
| 4 | | | 4 | | | | | | | | |
| Expen | | | | | | | | | | | |
| 5 | Advertising | | 5 | | | | | | | | |
| 6 | • | nstructions) | 6 | | | | | | | | |
| 7 | • | nance | 7 | | 1, | 200. | | | | | |
| 8 | | | 8 | | | | | | | | |
| 9 | | | 9 | | | | | | | | |
| 10 | • | essional fees | 10 | | - 1 | 0.0.0 | | | | | |
| 11 12 | • | id to banks, etc. (see instructions) | 11 | | ⊥, | 000. | | | | | |
| 13 | | | 13 | | | | | | | | |
| 14 | | | 14 | | 2 | 400. | | | | | |
| 15 | ' | | 15 | | | 000. | | | | | |
| 16 | | | 16 | | | | | | | | |
| 17 | | | 17 | | 3, | 000. | | | | | |
| 18 | | e or depletion | 18 | | | | | | | | |
| 19 | Other (list) ▶ | | 19 | | | | | | | | |
| 20 | Total expenses. Add | lines 5 through 19 | 20 | | 9, | 600. | | | | | |
| 21 | | line 3 (rents) and/or 4 (royalties). If | | | | | | | | | |
| | | instructions to find out if you must | | | | | | | | | |
| | file Form 6198 | | 21 | | -9, | 000. | | | | | |
| 22 | | l estate loss after limitation, if any, | 00 | , | 0 (| ١ | , | | | | , |
| 220 | on Form 8582 (see in | structions) eported on line 3 for all rental prope | 22 | Į(| -9,(| 23a | (| c | 00. | |) |
| 23a b | | eported on line 3 for all reyalty prope | | | | 23b | | - 0 | 00. | | |
| C | | eported on line 4 for all properties | | | | 23c | | | | | |
| d | | eported on line 18 for all properties | | | | 23d | | | | | |
| e | | eported on line 20 for all properties | | | | 23e | | 9,6 | 00. | | |
| 24 | | e amounts shown on line 21. Do no t | | | | | | ., , | 24 | | |
| 25 | • | sses from line 21 and rental real estate | | • | | nter tota | al losses her | е. | 25 (| | 9,000.) |
| 26 | Total rental real est | ate and royalty income or (loss). (| Comb | ine lines | s 24 ar | nd 25. E | nter the re | sult | | | · |
| - | | V, and line 40 on page 2 do not a | | | | | | | | | |
| | Schedule 1 (Form 104 | 40), line 5. Otherwise, include this an | nount | t in the t | otal on | line 41 | on page 2 | | 26 | | -9,000. |