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) Tayspar's name ### Social security number ### D61-81-2459 ### D61-81-81-2459 ### D61-81-2459 ### D61-81-81-2459 ### D61-81-		3.5.1.25 051.1.55					
Spouse's social security number Part Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.) 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	Submis	ssion Identification Number (SID)					
Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.) Enter whole dollars only on lines 1 through 5. Notes Form 1040-55 filter use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income	Taxpayer	's name	Social securi	ty numi	per		
Part II Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.) Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS (liters use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	JAYA	NTEE NARENDRA BHALERAO	061-81	-245	9		
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Spouse's	name	Spouse's soo	ial seci	urity numb	er	
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Part	Tax Return Information — Tax Year Ending December 31. 2021 (Enter	vear vou a	re au	thorizin	a.)	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1			<i>y</i> = 0 <i>y</i> = 0 0	0 0.0.		9-/	
1 31,092. 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 4,511. 4 Amount you want refunded to you 4 2,535. 5 Amount you ower 1 4 2,535. 5 Amount you ower 2 Amount refunded to you 4 2,535. 5 Amount you ower 2 Toxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, Ideotevire that I have examined a copy of the income tax return (original or amended) I am now authorizing and to he best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for ny delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasing and its designated Filencial Agent to initiate an ACH electronic funds withdrawal (direct debt) entry to the financial institution account indicated in the tax preparation software for any debt in flederal taxes over don't have that mandor a payment of assimated tax, and the financial institution indicated in the tax preparation software for any debt in discretal taxes over don't have that mandor a payment of settlement distribution indicated in the tax preparation software for any debt in discretal taxes over don't have the control of any refund. If applicable, I authorize the settlement (and the entire that the entire that the amounts in the entire that							
2 1, 9.76. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 4, 511. 4 Amount you want refunded to you . 4 2, 535. 5 Amount you owe . 4 2, 535. 6 Amount you owe . 4 2, 535. 6 Amount you owe . 4 2, 535. 7 Amount you owe . 4 2, 535. 8 Amount you want refunded to you . 4 2, 535. 8 Amount you want refunded to you . 4 2, 535. 8 Amount you want refunded to you return) 1 Under penalties of perjury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of your 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 initate an ACH electronic funds withdrawal (direct debit perty to the financial institution account indicate that 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 for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutions involved in the payment of the payment (settlement) date. I side authorize the financial institutions involved in the payment of the payment (settlement) date. I side authorize the financial institutions involved in the processing of the electronic payment of the sace to receive confidential information necessary to answer inquiries and resolve issues related to the payment further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent. 1 authorize				1	3	1,0	92.
Amount you want refunded to you				2			
Amount you want refunded to you Amount you want refunded to you Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjun; I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts from the income tax return (original or amended) I am now authorizing, and to the best of the original or amended) I am now authorizing. One and the income tax and the incama tax of the inca	3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			
S Amount you owe	4	Amount you want refunded to you		4			
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of return (original or amended) I am now authorizing, and to the best of control (original or amended) I am now authorizing. I consent to allow my intermediale service provider, transmitter, or electronic return original or interest or control (original or amended) I am now authorizing. I consent to allow my intermediale service provider, transmitter, or electronic return original (FEN) (or any delay in processing the return or refund, and (c) the date of any refund. If applicable, lauthorize the U.S. reasury and its designated financial Agent to initiate an ACH electronic funds withdrawal (direct debti) entry to the financial institution account indicated in the tax preparation software for payment of my deteral taxes owed on this return and/or a payment of estimated ata, and the financial Institution account indicated in the tax preparation software for payment of the tax of the care of the control or any delay into contact the U.S. Treasury Financial Agent to terminacial Agent to the institution involved in the tax preparation software for payment, fund to or any delay into contact the U.S. Treasury Financial Agent at 1.888-353-4637. Payment cancellation requests must be received no later than 2 business days prior to the payment (estitlement) 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 resolucities and resolucities and resolucities and resolucities of the payment of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolucities of the payment of the electronic payment of the understance of the electronic payment of the electronic payment of the electronic payment of the	5	Amount you owe					
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (FRO) 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 intitate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the transmission, (b) the reason payment of return declared tax, and the financial institution account indicated in the tax preparation software for payment of the standard tax, and the financial institution account indicated in the tax preparation software for apparent in the tax preparation software for the payment of the transmission of the payment of the p	Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and I	сеер а сор	y of y	our ret	urn)	
Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC ER0 firm name ER0 firm name ER0 firm name Signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only I authorize Date	my know return (c to send for any c Agent to paymen authoriz paymen business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induction to find the financial content in the financial institution at the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate tt, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions of the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the publication of the publicat	e are the amitter, or electro- ection of the to S. Treasury a cated in the to in to debit the the authorizates must be processing of ayment. I fur	ounts for the counts of the co	from the iturn origing ssion, (b) designate paration sto this acrowled no later through the control of the cont	ncom the red d Fin- oftwa count (can ater the baymage that	ne tax (ERO) eason ancial are for t. This icel) a han 2 ent of at the
I authorize GLOBAL TAXES LLC to enter or generate my PIN ERRO firm name signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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. Your signature ▶ Date ▶ Spouse's PIN: check one box only I authorize						7	
ERO firm name signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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. Your signature ▶ □ Date ▶ Spouse's PIN: check one box only □ I authorize □ to enter or generate my PIN □ □ I authorize □ ERO firm name signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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 ▶ □ Date ▶ □ 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. □ S 8 7 2 7 8 6 1 9 8 9 □ Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above 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.				2 4	4 5 9	\rfloor as	s mv
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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 6 1 9 8 9 Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above 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 ▶	Spouse	e's signature ▶ Date ▶					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above 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							
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requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns. ERO's signature ▶ Date ▶			x return (orig	nal or	amended		
						JO WI	0
ERO Must Retain This Form — See Instructions	ERO's	signature ▶ Date ▶					
		ERO Must Retain This Form — See Instructions					

Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent one box. Your identifying number Your first name and middle initial Last name (see instructions) JAYANTEE NARENDRA **BHALERAO** 061-81-2459 Check if: X Individual Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. 2500 JOHN F KENNEDY Estate or Trust 611 City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code

Foreign province/state/county

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?

07304

Foreign postal code

Yes

Form **1040-NR** (2021)

REV 03/25/22 PRO

BAA

X No

JERSEY CITY

Foreign country name

Dependents									(4) 🗸	if qualifie	s for (see i	nst.):
(see instructions):		(1) First name	Last n	ame	(2) Depende identifying nu			pendent's ship to you	1	x credit	Credit fo	or other
		(1) 1 1101 1101110			,g		70.00.0	op to you	1 -	7	depen	7
If more than four									+		-	<u>-</u>
dependents, see instructions and										-		i
check here ►									1 7			i
Income	1a	Wages, salaries, tips,	etc. Attacl	n Form(s) W	-2					1a	31,	,092.
Effectively	b	Scholarship and fello	wship gran	ts. Attach Fo	orm(s) 1042-S or	require	d statemer	t. See instru	ctions .	1b		
Connected With U.S.	С	Total income exempt L, line 1(e)			edule OI (Form 1	040-NR	·	Ic				
Trade or	2a	Tax-exempt interest		2a		b Tax	ـــ kable intere	st		2b		
Business	За	Qualified dividends		3a		b Ord	dinary divic	ends		3b		
	4a	IRA distributions .		4a		b Tax	rable amoι	ınt		4b		
	5a	Pensions and annuitie	es	5a		b Tax	kable amou	int		5b		
	6	Reserved for future us	se							6		
	7	Capital gain or (loss).	Attach Scl	nedule D (Fo	orm 1040) if requi	red. If n	ot required	, check here	. ▶ 🗌	7		
	8	Other income from So	chedule 1 (Form 1040),	line 10					8		
	9	Add lines 1a, 1b, 2b,	3b, 4b, 5b,	7, and 8. Th	his is your total e	effective	ely connec	ted income	▶	9	31,	,092.
-	10	Adjustments to incom	ne:									
	а	From Schedule 1 (For	,,					0a				
	b	Reserved for future us	se				1	0b				
	С	Scholarship and fellow	wship gran	ts excluded			1	0с				
	d	Add lines 10a and 10		-	=		е		▶	10d		
•	11	Subtract line 10d from	n line 9. Th	is is your ad	ljusted gross in	come			▶	11	31,	,092.
•	12a	Itemized deductions residents of India, sta						2a 1	2,550.			
	b	Charitable contributio	ns for certa	ain residents	of India. See ins	truction	s . 1	2b				
	С	Add lines 12a and 12	b							12c	12,	,550.
•	13a	Qualified business inc	ome dedu	ction from F	orm 8995 or For	m 8995-	-A . 1	3a				
	b	Exemptions for estate	es and trus	ts only. See	instructions .		1	3b				
	С	Add lines 13a and 13	b							13c		
-	14	Add lines 12c and 13	c							14	12,	,550.
•	15	Taxable income. Sub	otract line	14 from line	11. If zero or less	s, enter -	-0			15	18,	,542.

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

Form 1040-NR (2	2021)									Page 2
	16	Tax (see instructions). Check if	any from Form	(s): 1 88	14 2 4972	2 3 🗌		16	2	,024.
	17	Amount from Schedule 2 (Form	n 1040), line 3					17		0.
	18	Add lines 16 and 17						18	2	,024.
	19	Nonrefundable child tax credit	or credit for c	ther depender	its from Schedule	8812 (Form 104	0)	19		
	20	Amount from Schedule 3 (Form	n 1040), line 8					20		48.
	21	Add lines 19 and 20						21		48.
	22	Subtract line 21 from line 18. It	f zero or less,	enter -0				22	1	<u>,976.</u>
	23a	Tax on income not effectively from Schedule NEC (Form 104	,			23 a				
	b	Other taxes, including self-em line 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	1	,976.
	25	Federal income tax withheld fr	om:							
	а	Form(s) W-2				25 a 4	,511.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	4	,511.
	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 o 8812 (Form 1040)		hild tax credit		28				
	29	Credit for amount paid with Fo	rm 1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Forn	n 1040), line 1	5		31				
	32	Add lines 28, 29, and 31. Thes	e are your tot	al other paym	ents and refunda	ble credits	. ▶	32		
	33	Add lines 25d, 25e, 25f, 25g, 2	26, and 32. The	ese are your to	tal payments .		. ▶	33	4	,511.
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	2	,535.
	35a	Amount of line 34 you want re	funded to you	J. If Form 8888	is attached, check	k here		35a		
Direct deposit?	▶b	Routing number 3 2 2	2 7 1 6	5 2 7	▶ c Type: 🛛	Checking	Savings			
See instructions.	▶ d	Account number 5 2 5	1 9 3 !	5 7 6						
	►e	,				es not shown on	page 1,			
	36	Amount of line 34 you want ap	plied to your	2022 estimate	ed tax . 🕨	36				
Amount	37	Amount you owe. Subtract lin	ne 33 from line	24. For details	on how to pay, se	ee instructions	. ▶	37		
You Owe	38	Estimated tax penalty (see inst	tructions) .		🕨	38				
Third Party Designee	•	·	•				Complete b	elow.	⊠ No	
3	Desigi name			Phone no. ▶				ation _		
Sign			a use							
Here	Yours	signature		Date Your occupation						
					Protection PIN, enter it h	here				
	7					EEK	(see ir	ıst.) ▶		
	Phone		D 1 .		S	Date	DTIN		<u> </u>	
Paid		rer's name		•						
Preparer				A RAM SAGAR	GUPTA TALLAM	04/08/2022	P02082			
Use Only		name GLOBAL TAXES							8)965-	
· · · · ·	Firm's	address ► 2530 Pebble	e Creek I	n Cummin	g GA 30041		Firm's Ell	N ▶ 30	-10171	.96

Form 1040-NR (2021)

SCHEDULE 3 (Form 1040)

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Sequence No. 03

Your social security number

Department of the Treasury Internal Revenue Service

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

JAYANTEE NARENDRA BHALERAO 061-81-2459 Part I **Nonrefundable Credits** 1 Foreign tax credit. Attach Form 1116 if required 1 2 Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 2 3 3 4 Retirement savings contributions credit. Attach Form 8880 4 48. 5 Residential energy credits. Attach Form 5695 5 Other nonrefundable credits: 6 a General business credit. Attach Form 3800 6a Credit for prior year minimum tax. Attach Form 8801 6b c Adoption credit. Attach Form 8839 6c **d** Credit for the elderly or disabled. Attach Schedule R 6d Alternative motor vehicle credit. Attach Form 8910 6e Qualified plug-in motor vehicle credit. Attach Form 8936 . . . 6f f Mortgage interest credit. Attach Form 8396 6g h District of Columbia first-time homebuyer credit. Attach Form 8859 6h Qualified electric vehicle credit. Attach Form 8834 6i Alternative fuel vehicle refueling property credit. Attach Form 8911 6i k Credit to holders of tax credit bonds. Attach Form 8912 . . . 6k Amount on Form 8978, line 14. See instructions 61 z Other nonrefundable credits. List type and amount ▶ 6z 7 7 Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 . . . 8 48.

Schedule 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021 Page **2**

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
Z	Other payments or refundable credits. List type and amount ▶	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

BAA

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

JAYANTEE NARENDRA BHALERAO 061-81-2459 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 4 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 ▶ 15 **Capital Gains and Losses From Sales or Exchanges of Property** Enter only the capital gains and losses from property sales or exchanges that are from source

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. reproperty 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 on Schedule D (Form 1040). Form 4797, or both.

nd ces not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy	(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).	
J.S. in								
real								
e D								
,								
ss	17 /	Add columns (f) and (g) of line 16 .				17	(

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

SCHEDULE OI (Form 1040-NR)

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

2021

Attachment
Sequence No. 7C

Your identifying number

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

JA:	ΥA	NTEE NARENDRA BHALEF	RAO				061-81-2	459	
Α		Of what country or countries w							
В		In what country did you claim	residence for tax purposes	s during the tax y	/ear?	United States			
С		Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of t	the United States? .		Yes	⊠ No
D	Were you ever:								
1	١.	A U.S. citizen?						Yes	⊠ No
2	2.	A green card holder (lawful per							X No
		If you answer "Yes" to (1) or (2)	,						
E		If you had a visa on the last d immigration status on the last d	ay of the tax year, enter year	our visa type. If y	you di		•		
F		Have you ever changed your v						☐ Yes	⊠ No
		If you answered "Yes," indicate	e the date and nature of the	e change ►					
G		List all dates you entered and I	eft the United States during	g 2021. See instr	uction	 1S.			
		Note: If you are a resident of C check the box for Canada or	Canada or Mexico AND cor Mexico and skip to item H	mmute to work ir	the l	Jnited States at frequ □ Canada	ent intervals, Mexico		
		Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Dat	e entered United State mm/dd/yy		arted United mm/dd/yy	d States
Н		Give number of days (including 2019							
I		Did you file a U.S. income tax I If "Yes," give the latest year an	return for any prior year?.					☐ Yes	⊠ No
J		Are you filing a return for a trus	st?					☐ Yes	⊠ No
		If "Yes," did the trust have a U.S. person, or receive a contr	J.S. or foreign owner unde ibution from a U.S. person	r the grantor trus	st rule	s, make a distributior	or loan to a	☐ Yes	□No
K		Did you receive total compens	ation of \$250,000 or more	during the tax yea	ar? .			Yes	⊠ No
		If "Yes," did you use an alterna	ative method to determine t	the source of this	comp	pensation?		Yes	☐ No
L		Income Exempt From Tax—If complete (1) through (3) below					tax treaty with	n a foreign	country,
1	١.	Enter the name of the country, amount of exempt income in the					claimed the tr	eaty benefi	t, and the
		(a) Cour	ntry	(b) Tax treaty ar	ticle	(c) Number of month claimed in prior tax ye		nount of exe in current ta	
		(e) Total. Enter this amount or	n Form 1040-NR. line 1c. D	o not enter it on	line 1a	a or line 1b	•		
2	2.	Were you subject to tax in a fo						Yes	□ No
		Are you claiming treaty benefit:						☐ Yes	⊠ No
		If "Yes," attach a copy of the C		-					
м		Check the applicable box if:	,		, •				
	١.	This is the first year you are ma with a U.S. trade or business u							onnected
•)	You have made an election in							e United
	_	States as effectively connected							

Form **8880**

Credit for Qualified Retirement Savings Contributions

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. 54

Name(s) shown on return

JAYANTEE NARENDRA BHALERAO

Your social security number

061-81-2459



You cannot take this credit if either of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2004; (b) is claimed as a dependent on someone else's 2021 tax return; or (c) was a **student** (see instructions).

						(a) You	u	(b) Your spouse
		•	LE account contribu	•				
•	•		ollover contributions.		1			
			mployer plan, volunta					
			olan contributions for 2021 (see instructions) 2 47					
Add lines 1 an					3	4	1 75.	
			before the due dat	,				
			ns). If married filing jo					
•			ructions for an except		4			
		•	•		5		175.	
	•		00		6	4	<u> 175.</u>	
			take this credit				7	475
			040-NR, line 11*	8		31,092.		
Enter the appl	icable decimal	amount from the table	e below.					
If line	8 is-		And your filing status					
0	But not	Married	Head of household	Single, Marr		ng		
Over—	over—	filing jointly		separate Qualifying w		.rl		
	4		line 9—			1)		
	\$19,750	0.5	0.5	0.5				
\$19,750	\$21,500	0.5	0.5	0.2				
\$21,500	\$29,625	0.5	0.5	0.1			9	x 0 .1
\$29,625	\$32,250	0.5	0.2	0.1				
\$32,250	\$33,000	0.5	0.1	0.1				
\$33,000	\$39,500	0.5	0.1	0.0				
\$39,500	\$43,000	0.2	0.1	0.0				
\$43,000	\$49,500	0.1	0.1	0.0				
\$49,500	\$66,000	0.1	0.0	0.0				
\$66,000		0.0	0.0	0.0				
			you can't take this cre					Į.
Multiply line 7	,						10	48
		•	from the Credit Limit				11	2,024
•		•	utions. Enter the sma		or lir	ne 11 here		
and on Sched	uie 3 (Form 10	40), iine 4					12	48

^{*} See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.