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.

Submission Identification Number (SID)

| Taxpay | ver's name | Social security n | lumber |
|--------|--|-------------------|-----------------|
| RIT | ESH REDDY RAKASI | 064-49-0 | 918 |
| Spouse | s's name | Spouse's social | security number |
| Par | t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter | er 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 | Adjusted gross income | | 1 15,740. |
| 2 | Total tax | [| 2 289. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | [| 3 2,260. |
| 4 | Amount you want refunded to you | [| 4 1,971. |
| 5 | | [| 5 |

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. 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 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 (ERO) 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 initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the 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. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) 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 resolve issues related to the payment. I 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.

Taxpayer's PIN: check one box only

| | 1 authorize | | 1717110 | ERO firm name | to enter of generate my r in | Er |
|---|-------------|--------|---------|---------------|------------------------------|----|
| X | l authorize | GLOBAL | TAYES | LLC | to enter or generate my PIN | 9 |

| Ent dor | er fiv n't er | /e di nter a | gits, all ze | but ros | as my |
|------------|------------------|-----------------|-----------------|------------|-------|
| 9 | 0 | 9 | 1 | 8 | |

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 |
|----|-------|----|----------|----|-----|

as mv Enter five digits, but don't enter all zeros

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—continu | e be | lov | / | | | | | | |
| 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 | - | - | 6 all ze | 9 | 89 | • |

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 🕨 | |
|--|--|--------|--------------------------|
| | st Retain This Form — See is Form to the IRS Unless | | |
| For Denergy and Deduction Act Nation and your toy re | ture instructions | | Earm 8879 (Bay, 01 2021) |

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/19/22 PRO

| 1040 | -NR Department of the Treasury-I | nternal Revenue Service Alien Income Tax | (99) Return | 2021 | OMB No. 15 | 45-0074 | IRS Use Only—Do not write or staple in this space. | | | |
|---------------------|---|---|-----------------------|-------------------|------------------|--|---|--|--|--|
| Filing Status | X Single Arried filing s | eparately (MFS) | 7 | widow(er) (QV | V) | | | | | |
| Check only one box. | If you checked the QW box, enter the child's name if the gualifying person is a child but not your dependent. | | | | | | | | | |
| Your first name a | and middle initial | Last name | Last name | | | Your identifying number (see instructions) | | | | |
| RITESH RE | DDY | RAKASI | | | | 064 | -49-0918 | | | |
| Home address (| number and street or rural route). If you | I have a P.O. box, see inst | ructions. | | Apt. no. | Check | if: 🛛 Individual | | | |
| 1604 GEOR | GETOWN DR | | | | | | Estate or Trust | | | |
| City, town, or pos | st office. If you have a foreign address, als | so complete spaces below. | State | ZIP co | de | | | | | |
| MONROE TO | WNSHIP | | NJ 08831 | | | | | | | |
| Foreign country | name | Foreign province/state/co | ounty | Foreig | n postal code | | | | | |
| At any time durir | ng 2021, did you receive, sell, exchang | e, or otherwise dispose of | any financia | al interest in ar | ny virtual curre | ncy? | 🗌 Yes 🛛 No | | | |

| Dependents | | | | | | | | (4) 🗸 | if qualifie | es for (see inst.): |
|-----------------------------------|-------|---------------------------|-------------------------|-------------------------|----------------|---------------|-------------------------|--------------|-------------|-----------------------------|
| (see instructions): | | (1) First name | Last name | (2) Dependidentifying | | | endent's ship to you | Child tax | < credit | Credit for other dependents |
| 16 | | | | | | | | |] | |
| If more than four dependents, see | | | | | | | | |] | |
| instructions and | | | | | | | | |] | |
| check here ► | | | | | | | | |] | |
| Income | 1a | Wages, salaries, tips, e | etc. Attach Form(s) W- | -2 | | | | | 1a | 18,240. |
| Effectively | b | Scholarship and fellow | ship grants. Attach Fo | orm(s) 1042-S | or required | d statement | . See instruc | tions . | 1b | |
| Connected | с | Total income exempt l | by a treaty from Sche | edule OI (Form | 1040-NR) |), Item | | | | |
| With U.S. | | L, line 1(e) | | | | 1 | c | | | |
| Trade or | 2a | Tax-exempt interest . | 2 a | | b Tax | able intere | st | | 2b | |
| Business | 3a | Qualified dividends . | 3a | | b Ord | linary divide | ends | | 3b | |
| | 4a | IRA distributions | 4a | | b Tax | able amou | nt | | 4b | |
| | 5a | Pensions and annuities | s 5a | | b Tax | able amou | nt | | 5b | |
| | 6 | Reserved for future use | ə | | | | | | 6 | |
| | 7 | Capital gain or (loss). A | ttach Schedule D (Fo | orm 1040) if rec | uired. If no | ot required, | check here | . 🕨 🗌 | 7 | |
| | 8 | Other income from Sch | nedule 1 (Form 1040), | line 10 | | | | | 8 | |
| | 9 | Add lines 1a, 1b, 2b, 3 | b, 4b, 5b, 7, and 8. Th | nis is your tota | l effective | ly connect | ed income | 🕨 | 9 | 18,240. |
| | 10 | Adjustments to income |): | | | | | | | |
| | а | From Schedule 1 (Form | n 1040), line 26 | | | 10 |)a í | 2,500. | | |
| | b | Reserved for future use | ə | | | 10 | Db | | | |
| | с | Scholarship and fellow | ship grants excluded | | | 10 | C | | | |
| | d | Add lines 10a and 10c. | These are your total | adjustments | to income | | | 🕨 | 10d | 2,500. |
| | 11 | Subtract line 10d from | line 9. This is your ad | ljusted gross | income | | · · · | 🕨 | 11 | 15,740. |
| | 12a | Itemized deductions | | | | | | | | |
| | | residents of India, stan | dard deduction. See | instructions Sta | l_Dedn_US/Indi | a Treaty 12 | 2a 1 | 2,550. | | |
| | b | Charitable contribution | s for certain residents | of India. See i | nstructions | s. 12 | 2b | 300. | | |
| | с | Add lines 12a and 12b | | | | | | | 12c | 12,850. |
| | 13a | Qualified business inco | ome deduction from F | orm 8995 or F | orm 8995- | A. 13 | Ba | | | |
| | b | Exemptions for estates | and trusts only. See | instructions | | 13 | Bb | | | |
| | с | Add lines 13a and 13b | | | | | | | 13c | |
| | 14 | Add lines 12c and 13c | | | | | | | 14 | 12,850. |
| | 15 | Taxable income. Subt | ract line 14 from line | 11. If zero or le | ess, enter - | 0 | | | 15 | 2,890. |
| For Disclosure, | Priva | cy Act, and Paperwork F | Reduction Act Notice, | see separate i | nstruction | s. B | AA REV |)3/19/22 PRO | Fo | rm 1040-NR (2021) |

| Form 1040-NR (| 2021) | | | | | | | Page 2 |
|-------------------------|---------------|--|--------------------|---------------------------------------|----------------------|---------------------------|------------|---------------------------------------|
| | 16 | Tax (see instructions). Check if any from Form | (s): 1 🗌 88 | 314 2 🗌 497 | 2 3 | | 16 | 289. |
| | 17 | Amount from Schedule 2 (Form 1040), line 3 | | | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | | | 18 | 289. |
| | 19 | Nonrefundable child tax credit or credit for o | ther depender | nts from Schedule | 8812 (Form 104 | 0) | 19 | |
| | 20 | Amount from Schedule 3 (Form 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 | 289. |
| | 23a | Tax on income not effectively connected v from Schedule NEC (Form 1040-NR), line 15 | | | 23a | | | |
| | b | Other taxes, including self-employment tax, line 21 | | · · · · · · · · · · · · · · · · · · · | 23b | | | |
| | с | Transportation tax (see instructions) | | | 23c | | | |
| | d | Add lines 23a through 23c | | | | | 23d | |
| | 24 | Add lines 22 and 23d. This is your total tax | | | | . 🕨 | 24 | 289. |
| | 25 | Federal income tax withheld from: | | | | | | |
| | а | Form(s) W-2 | | | 25a 2 | 2,260. | | |
| | b | Form(s) 1099 | | | 25b | | | |
| | с | Other forms (see instructions) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | 25d | 2,260. |
| | e | Form(s) 8805 | | | | | 25e | · |
| | f | Form(s) 8288-A | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | 25g | |
| | 26 | 2021 estimated tax payments and amount a | | | | | 26 | |
| | 27 | Reserved for future use | | | 27 | | | |
| | 28 | Refundable child tax credit or additional c 8812 (Form 1040) | hild tax credit | from Schedule | 28 | | | |
| | 29 | Credit for amount paid with Form 1040-C | | | 29 | | | |
| | 30 | Reserved for future use | | | 30 | | | |
| | 31 | Amount from Schedule 3 (Form 1040), line 1 | | | 31 | | | |
| | 32 | Add lines 28, 29, and 31. These are your tota | | | | . 🕨 | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. The | | | | | 33 | 2,260. |
| Refund | 34 | If line 33 is more than line 24, subtract line 2 | | | | | 34 | 1,971. |
| liorana | 35a | Amount of line 34 you want refunded to you | | | | ▶ □ | 35a | 1,971. |
| Direct deposit? | ►b | Routing number 0 1 1 0 0 1 | | | | Savings | oou | |
| See instructions. | ►d | Account number 4 6 6 0 0 7 3 | | | | ouvingo | | |
| | ►e | If you want your refund check mailed to an a | | | es not shown on | page 1, | | |
| | 26 | enter it here. Amount of line 34 you want applied to your | | | | | - | |
| Amount | 36 37 | Amount of line 34 you want applied to your Amount you owe. Subtract line 33 from line | | | 36 | | 37 | |
| You Owe | 38 | Estimated tax penalty (see instructions) . | | 1 . | 38 | | 31 | |
| | | ou want to allow another person to di | | | | | | |
| Third Party Designee | See ir | structions | | | ► | Complete | | X No |
| | Desig name | | Phone no. 🕨 | | | nal identifio er (PIN) | cation | |
| Cierro | | penalties of perjury, I declare that I have examined | | | | · / | | f my knowledge and |
| Sign Here | belief, | they are true, correct, and complete. Declaration of | preparer (other t | han taxpayer) is base | ed on all informatio | n of which | preparer h | as any knowledge. |
| | Your | signature | Date | Your occupation | | | | t you an Identity N, enter it here |
| | | | | DATA ANALY | ST | | nst.) ► | |
| | Phone | 2 00 | Email addres | | | (| , · | |
| D : 1 | | rer's name Preparer's sig | | | Date | PTIN | 0 | Check if: |
| Paid | | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA | 0 | СПРТА ТАТ.Т.АМ | 03/29/2022 | P02082 | | Self-employed |
| Preparer | | name► GLOBAL TAXES LLC | . IVIII OAGAN | 201 111 111111M | 0012012022 | | | 3) 965-9522 |
| Use Only | | address► 2530 Pebble Creek L | n Cummin | A CA 300/1 | | | | -1017196 |
| Go to www irs | | m1040NR for instructions and the latest information | | y GA JUU41 | REV 03/19/22 PR | | | m 1040-NR (2021) |
| | | | | | | - | 1 011 | |

| SCHEDULE | 1 |
|-------------|---|
| (Form 1040) | |

Department of the Treasury

Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074

| Internal Revenue Service | ► Go to www.irs.gov/Fo |
|--------------------------|-------------------------------|
| Name(s) shown on Fo | orm 1040, 1040-SR, or 1040-NR |

| Your social security | number |
|----------------------|--------|
| 064-49-0918 | |

Part I Additional Income

RITESH REDDY RAKASI

| 1 | Taxable refunds, credits, or offsets of state and local income taxes | | 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, tru 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 | Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property | 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) . | 8р | | |
| z | Other income. List type and amount ► | 0- | | |
| 0 | | 8z | 0 | |
| 9 10 | Total other income. Add lines 8a through 8z | | 9 | |
| 10 | | · · · · · · · · · | 10 | |
| | | | | |

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2021

| Par | t II Adjustments to Income | | | |
|-----|--|-----------|----------|----------------------|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-basis officials. Attach Form 2106 | | 12 | |
| 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 | 2,500. |
| 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 81 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 ► 24z | | | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to inc | | | |
| | here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a | | 26 | 2,500. |
| | BAA REV 03/ | 19/22 PRO | scnedule | e 1 (Form 1040) 2021 |

SCHEDULE NEC (Form 1040-NR)

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

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

Attach to Form 1040-NR.

OMB No. 1545-0074

21

Department of the Treasury Internal Revenue Service (99)

Form 4797, or both.

Name shown on Form 1040-NR

2 Attachment Sequence No. 7B

Your identifying number 064-49-0918

RITESH REDDY RAKASI

| | - | - | | | | | | | | - |
|--|---|----------|--|--------------------------|-----|-----------------------------|------------------------|-------------------------|--|--|
| Enter a | amount of income und | er the a | appropriate rate of tax. See instructions. | | | | | | | |
| Nature of Income | | | | | | (a) 10% (b) 15% | (c) 30% | (d) Other (specify) | | |
| | | | | | _ | (4) 1070 | (2) 1070 | (0) 00 / 0 | % | % |
| 1 | Dividends and divide | | | | | | | | | |
| а | Dividends paid by U.S. corporations | | | | | | | | | |
| b | | - | corporations | | 1b | | | | | |
| с | c Dividend equivalent payments received with respect to section 871(m) transactions | | | | | | | | | |
| 2 | Interest: | | | | | | | | | |
| а | Mortgage | | | | 2a | | | | | |
| b | Paid by foreign corp | oratior | 18 | | 2b | | | | | |
| с | Other | | | | 2c | | | | | |
| 3 | Industrial royalties (p | atents | s, trademarks, etc.) | | 3 | | | | | |
| 4 | Motion picture or TV | copyr | ight royalties | | 4 | | | | | |
| 5 | Other royalties (copy | rights, | , recording, publishing, etc.) | | 5 | | | | | |
| 6 | Real property incom | e and | natural resources royalties | | 6 | | | | | |
| 7 | | | | | 7 | | | | | |
| 8 | Social security bene | fits . | | | 8 | | | | | |
| 9 | Capital gain from line | e 18 b | elow | | 9 | | | | | |
| 10 | Gambling-Resident | ts of C | anada only. Enter net income in column | (c). | | | | | | |
| а | Winnings | | | | | | | | | |
| b | Losses | | | | 10c | | | | | |
| 11 | Note: Losses not all | owed | lents of countries other than Canada. | | 11 | | | | | |
| 12 | Other (specify) ► | | | | 12 | | | | | |
| 13 | Add lines 1s through | . 10 in | columns (a) through (d) | | 13 | | | | | |
| 14 | • | | tax at top of each column | | 14 | | | | | |
| 15 | | | ely connected with a U.S. trade or busine | | | rough (d) of line 14 | Enter the total here a | nd on Form 1040-N | R, line 23a ► 15 | |
| | | | | | | | anges of Proper | | | |
| Enter o | nly the capital gains and | 16 | | | | | | | (f) LOSS | |
| losses from property sales or exchanges that are from sources within the United States and not | | 10 | (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) | (b) Date acq mm/dd/yy | | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | If (e) is more than (d), subtract (d) from (e). | (g) GAIN If (d) is more than (e), subtract (e) from (d). |
| effectiv | effectively connected with a U.S. | | | | | | | | | |
| business. Do not include a gain or loss on disposing of a U.S. real | | | | | | | | | | |
| | ty interest; report these nd losses on Schedule D | | | | | | | | | |
| (Form 1 | | | | | | | | | | |
| | property sales or ges that are effectively | | | | | | | | | |
| exchanges that are effectively connected with a U.S. business | | 17 | Add columns (f) and (d) of line 16 | | | | | 17 | (| |

17 (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-

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

18

| SCHE | DU | LE | ΟΙ |
|-------|-----|-----|----|
| (Form | 104 | 0-N | R) |

Other Information

OMB No. 1545-0074

| (10111 | 1040-111) | ► Go | to www.irs.gov/Form1040 | | | n. | 2(0) | 21 |
|----------------------------|-------------------------------------|------------------------|---|-------------------------|--|-----------------|-------------------------------|-------------|
| Department of the freuduly | | | ach to Form 1040-NF nswer all questions. | | Attachment Sequence No. 7C | | | |
| | hown on Form 1040 | -NB | | iswer all questions. | | Your identifyi | | 10. 10 |
| | SH REDDY F | | | | | 064-49- | 0 | |
| A | | | vere you a citizen or nation | al during the tax ve | ar? TNDTA | | | |
| В | In what country | / did vou claim | residence for tax purpose | es during the tax yea | ar? United States | | | |
| c | Have you ever | applied to be a | green card holder (lawful | permanent resident) | of the United States? | | Yes | XNo |
| D | Were you ever: | | 3 • • • • • • • • • • | , | | | | |
| 1. | A U.S. citizen? | | | | | | Yes | 🛛 No |
| 2. | A green card h | | rmanent resident) of the U | | | | | 🛛 No |
| | If you answer " | Yes" to (1) or (2 | 2), see Pub. 519, chapter 4 | , for expatriation rule | es that apply to you. | | | |
| Е | | | day of the tax year, enter day of the tax year. F1 | | u did not have a visa, ei | - | | |
| F | Have you ever | changed your v | visa type (nonimmigrant st the date and nature of the | atus) or U.S. immigra | ation status? | | 🗌 Yes | X No |
| G | - | | left the United States duri | | | | - | |
| | | | Canada or Mexico AND c r Mexico and skip to item | | | uent intervals, | | |
| | Date entered mm/ | United States dd/yy | Date departed United Sta mm/dd/yy | ites | Date entered United State mm/dd/yy | es Date de | parted Unite mm/dd/yy | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| н | | | vacation, nonworkdays, ar | | | | | |
| | 2019 Did you file a Li | S incomo tox | , 2020 | , and | 2021 365 | • | X Yes | No |
| I | If "Yes " give th | .S. Income lax | return for any prior year? nd form number you filed | ••••• | ОДОМФ | | r ies | |
| J | Are you filing a | return for a tru | st? | <u>+</u> | 040111 | | Yes | 🗙 No |
| C | If "Yes," did th | e trust have a | U.S. or foreign owner und ribution from a U.S. perso | er the grantor trust | rules, make a distributio | n or loan to a | a | |
| к | | | sation of \$250,000 or more | | | | | |
| | - | | ative method to determine | | | | | |
| L | Income Exemp | t From Tax-I | f you are claiming exemp . See Pub. 901 for more in | tion from income ta | x under a U.S. income | | | country ו |
| 1. | Enter the name | of the country, | the applicable tax treaty a ne columns below. Attach F | rticle, the number of | months in prior years you | l claimed the | treaty benef | it, and the |
| | | (a) Cou | intry | (b) Tax treaty artic | le (c) Number of mont claimed in prior tax ye | | mount of ex e in current t | |
| | | | | | | | | |
| | (e) Total. Ente | r this amount o | n Form 1040-NR, line 1c. | Do not enter it on lin | e 1a or line 1b | . • | | |
| 2. | | | preign country on any of th | | | | Yes | No |
| 3. | Are you claimin | g treaty benefi | ts pursuant to a Competer Competent Authority deter | nt Authority determin | ation? | | X Yes | 🗌 No |
| M 1 | Check the appl This is the first | | aking an election to treat i | ncome from real pro | perty located in the Unit | ed States as | effectively c | connecter |

d roperty located

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/19/22 PRO Schedule OI (Form 1040-NR) 2021