# 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	ssion Identification Number (SID)		-		
Spouse's social security number	Taxpaye	er's name	Social securit	y numb	er	
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	NILA	AY NIGAM	777-43-	-441	2	
Enter whole dollars only on lines 1 through 5.  Note: Form 104-OSS files use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 1 Adjusted gross income 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 10, 747. 4 Amount you want refunded to you 4 2, 453. 5 Amount you own refunded to you 5 Amount you want refunded to you 5 Amount you own refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you 9 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount 9 Amo	Spouse'	s name	Spouse's soc	ial secu	urity numbe	er
Enter whole dollars only on lines 1 through 5.  Note: Form 104-OSS files use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 1 Adjusted gross income 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 10, 747. 4 Amount you want refunded to you 4 2, 453. 5 Amount you own refunded to you 5 Amount you want refunded to you 5 Amount you own refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you 9 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount 9 Amo	Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r year you a	re au	thorizing	J.)
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2	Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
3 10,747. 4 Amount you want refunded to you 4 2, 453. 5 Amount you want refunded to you 5 Amount you want refunded to you 6 5 Amount you want refunded to you 6 5 5 Amount you want refunded to you 6 5 5 Amount you want refunded to you 6 5 5 5 Amount you want refunded to you 7 5 5 5 5 Amount you want refunded to you 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1	Adjusted gross income		1	69	9,852.
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 perlipy, 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 knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are mounts from the income tax return (original or amended) I am now authorizing, and to the best of the complete of the income tax return (original or amended) I am now authorizing. I consent in the IRS and to receive from the IRS and IRS	2	Total tax		2		8,294.
Amount you owe    Part II	3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10	0,747.
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 beat of the year of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing. The income tax return (original or amended) I am now authorizing. The income tax return (original or amended) I am now authorizing. The ERO must complete Part III below.    Part   Declare   Part   De	4			4	:	2,453.
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 bellef, it is time, correct, and complete. I further declare that the amounts in Fart I above are entering from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and bellef it is time, correct, and complete. I further declare that the amounts in Fart I above are entering or 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 debid) entry to the financial institution account indication of the transmission, (b) the reason for rejection is or remain in full force and effect until 1 notify the U.S. Treasury Financial Agent to terminate the 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 to remain in full force and effect until 1 notify the U.S. Treasury Financial Agent to terminate the time that x preparation software for payment of my federal taxes owed on this return and/or a payment. I must contact the U.S. Treasury Financial Agent at 1-888-83-4537. 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 procase got 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 (Filh) below is my signature for 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				_		
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 original or feRD 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 return, and (c) the date of any return, if applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debt) 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 stimated tax, and the financial institution debt debt debt to debt the entry to this account. This authorization is to remain in full force and effect until 1 notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a subspiness 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    I authorize	Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our ret	urn)
Taxpayer's PIN: check one box only    authorize   GLOBAL TAXES   LLC   ERO firm name	to send for any Agent t paymer authoriz paymer busines taxes to persona	If my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the loo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the transfer of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation residually prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive 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) I a	ection of the tr J.S. Treasury and dicated in the ta on to debit the et the authoriza- quests must be exprocessing of payment. I furt	ansmised and its of an and its of an	ssion, <b>(b)</b> designated paration so this according revoke wed no la ectronic pulsassion.	the reason of Financial oftware for count. This (cancel) a ter than 2 sayment of e that the
I authorize   GLOBAL TAXES LLC   to enter or generate my PIN   Set 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   Date   Spouse's PIN: check one box only   I authorize   ERO firm name   signature on the income tax return (original or amended) I am now authorizing. Check this box only   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 will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only   I 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.   5 8 7 2 7 8 6 1 9 8 9   Don't enter all zeros   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.						1
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 method in the 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. 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 ▶  ERO Must Retain This Form — See Instructions			3	4 4	1 2	
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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		if you are entering your own PIN and your return is filed using the Practitioner PIN met				
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.  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 ▶  ERO Must Retain This Form — See Instructions	Spous	e's signature ▶ Date ▶				
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ERO Must Retain This Form — See Instructions	authoriz	zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subr	nitting this retu	rn in a	accordanc	
ERO Must Retain This Form — See Instructions	ERO's	signature ▶ Date ▶				
			Do C-			

E 1040-NR Department of the Treasury-Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return 2021 OMB No. 1545-0074 RS Use Only-Do not write or staple in this space.

T:1:		•					-		<u> </u>					
Filing Status		Single Married filing separately (MFS) Qualifying widow(er) (QW)												
Check only one box.	•	ou checked the QW box, enter the alifying person is a child but not y												
Your first name a	and r	middle initial										Your identifying number (see instructions)		
NILAY				NIGA	M						77	7-43	3-4412	
Home address (ı	numk	per and street or rural route). If you	ı hav	re a P.C	). box, see inst	ructions.			Apt. no	).	Chec	ck if:	X Indivi	dual
7472 W SA	XTO	N DRIVE							E207					e or Trust
City, town, or pos	t offi	ce. If you have a foreign address, al	SO CC	mplete	spaces below.	State		ZIP cc	ode					
BOISE						ID		8371	4					
Foreign country	nam	е	For	eign pro	ovince/state/co	ounty		Foreig	ın postal	code				
		204 111												
At any time durir	ng 20	021, did you receive, sell, exchang	je, or	otherw	ise dispose of	any finan	cial inter	est in a	ny virtua	curre	псу?		Yes	X No
Dependents					(2) 5		4-1			(4)	<b>✓</b> if c	qualifie	es for (see	inst.):
(see instructions):		(1) First name Last nam			(2) Depending identifying i			Dependonship 1		Child	d tax c	redit		or other
		(1) That have	21110		identifying i	10111001	Tolati	orioriip i	io you				Сере	
f more than four											+			_
dependents, see											+			_
nstructions and check here ►											$\overline{\Box}$			_
Income	1a	Wages, salaries, tips, etc. Attach	For	m(s) W-	-2						丁	1a	72	,011.
Effectively	b	Scholarship and fellowship grant		` '								1b		, , , , , ,
Connected	С	Total income exempt by a treat			. ,	•			0 111011 40					
With U.S.	Ū	L, line 1(e)	-					1c						
Trade or	2a	Tax-exempt interest	2a			<b>b</b> Tax	able inte	erest .			. [	2b		
Business	3a	Qualified dividends	3a		1.	<b>b</b> Ord	dinary div	/idends	·		. 📙	3b		1.
	4a	IRA distributions	4a			<b>b</b> Tax	able am	ount .			. <u>L</u>	4b		
	5a	Pensions and annuities	5a			<b>b</b> Tax	able am	ount .				5b		
	6	Reserved for future use									6			
	7									ן ⊑	7		4.	
	8	Other income from Schedule 1 (I	Form	1040),	line 10							8		
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b,	7, ar	nd 8. Th	nis is your <b>tota</b>	l effective	ly conn	ectedi	ncome .	1	<b>-</b>	9	72	,016.
1	10	Adjustments to income:												
	а	From Schedule 1 (Form 1040), lin						10a	2	2,164	4.			
	b	Reserved for future use						10b						
	С	Scholarship and fellowship grant						10c						
	d	Add lines 10a and 10c. These ar								1		l0d		,164.
1	11	Subtract line 10d from line 9. The	•	•						!		11	69	,852.
1	l2a	<b>Itemized deductions</b> (from Sci residents of India, standard dedu						12a	1:	2,55	0.			
	b	Charitable contributions for certa	ain re	sidents	of India. See i	nstruction	s .	12b		30	0.			
	С	Add lines 12a and 12b									. [1	l2c	12	,850.
1	l3a	Qualified business income dedu	ction	from F	orm 8995 or F	orm 8995-	-A .	13a						
	b	Exemptions for estates and trust	ts on	ly. See	instructions			13b						
	С	Add lines 13a and 13b									. 1	I3c		
1	14	Add lines 12c and 13c									. [	14	12	,850.
1	15	Taxable income. Subtract line 1	4 fro	m line	11. If zero or le	ss, enter -	-0				. [	15		,002.

BAA

Form 1040-NR (	2021)												Page 2
	16	Tax (see instructions). Check if	any from Form	(s): <b>1</b> 8	314 <b>2</b> [	4972	2 <b>3</b>			16		8,	294.
	17	Amount from Schedule 2 (Forr	n 1040), line 3							17			0.
	18	Add lines 16 and 17								18		8,	,294.
	19	Nonrefundable child tax credit	or credit for o	ther depende	nts from Sc	hedule	8812 (F	orm 104	0)	19			
	20	Amount from Schedule 3 (Forr	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		8 ,	,294.
	23a	Tax on income not effectively from Schedule NEC (Form 104					23a						
	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 <b>total tax</b>						▶	24		8,	294.
	25	Federal income tax withheld fr	om:										
	а	Form(s) W-2					25a	10	747.				
	b	Form(s) 1099					25b						
	С	Other forms (see instructions)					25c						
	d	Add lines 25a through 25c .								25d		10,	747.
	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 of 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 (Forr	n 1040), line 1	5			31						
	32	Add lines 28, 29, and 31. Thes	e are your <b>tot</b>	al other paym	ents and r	efunda	ble cre	dits	▶	32			
	33	Add lines 25d, 25e, 25f, 25g, 2	6, and 32. The	ese are your <b>t</b> o	otal payme	nts .			▶	33		10,	747.
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33	This is the	amoun	t you <b>o</b>	verpaid		34		2,	453.
	35a	Amount of line 34 you want re			3 is attached	d, chec	k here		. ▶	35a		2,	453.
Direct deposit?	▶b	Routing number 0 4 3	0 0 0 0	9 6	<b>▶ c</b> Type	e: 🗌	Checki	ng 🔀	Savings				
See instructions.	►d	Account number 1 0 6	3 9 3 (	0 8 5 9									
	<b>▶</b> e	If you want your refund check enter it here.					s not s	hown on	page 1,				
	36	Amount of line 34 you want ap	plied to your	2022 estimat	ed tax .	<b>•</b>	36			-			
Amount	37	Amount you owe. Subtract lir	e 33 from line	24. For detail	s on how to	pay, s	ee instr	uctions	. ▶	37			
You Owe	38	Estimated tax penalty (see inst	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 No	
Doolgiloo	Desig	nee's		Phone no. ▶					nal identifi er (PIN)	cation	$\Box$		
Sign		penalties of perjury, I declare that I they are true, correct, and complete											
Here	Your signature Date Your occupation						RS se	,		,			
	7				MACHINE	LEAR	NING	ENGINE	ER (see	inst.) ►			
	Phone	e no.		Email addres	ss								
Paid	Prepa	arer's name	Preparer's sign	gnature			Date		PTIN		Chec		
Preparer	SYAM I	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TA	ALLAM	04/14	1/2022	P0208	2703	□s	elf-en	nployed
Use Only		s name ► GLOBAL TAXES							Phone n	ю. (б	78)9	65-9	9522_
Joe Only	Firm's	s address ► 2530 Pebble	e Creek I	n Cummin	a GA 30	041			Firm's E	IN ▶ 3	0-10	171	96

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

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

Your social security number
777-43-4412

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	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)	3m		
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	

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-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	<b>&gt;</b>		
С	Date of original divorce or separation agreement (see instructions)			
20	IRA deduction		20	
21	Student loan interest deduction		21	2,164.
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	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	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	24j		
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 <b>adjustments</b> there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	2,164.

#### **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.

202	1
Attachment Sequence No.	7B

Name shown on Form 1040-NR Your identifying number NILAY NIGAM 777-43-4412 Enter amount of income under the appropriate rate of tax. See instructions

	Notice of Ironne.				/l-> 450/	/-\ 000/	(d) Other (specify)			
		Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	%	%		
1	Dividends and divide	nd equivalents:								
а	Dividends paid by U.	S. corporations	1a	1						
b	Dividends paid by fo	reign corporations	1b							
С	Dividend equivalent p	ayments received with respect to section 871(m) transactions	s <b>1c</b>							
2	Interest:									
а	Mortgage		2a	1						
b	Paid by foreign corpo									
С	Other		20							
3	Industrial royalties (p	atents, trademarks, etc.)	3							
4	Motion picture or TV	copyright royalties	4							
5	Other royalties (copy	rights, recording, publishing, etc.)	5							
6	Real property income	e and natural resources royalties	6							
7	Pensions and annuiti	7								
8	Social security benef									
9		e 18 below	9							
10	Gambling—Resident If zero or less, enter									
а	Winnings									
b		<u> </u>	100	С						
11	Gambling winnings – Note: Losses not allo	Residents of countries other than Canada.	11	ı						
12	Other (specify) ▶		_							
			_ 12							
13	•	12 in columns (a) through (d) $\ldots \ldots \ldots \ldots$								
14		ate of tax at top of each column								
15	Tax on income not ef	fectively connected with a U.S. trade or business. Add colur	. ,	• ( )			R, line 23a ► <b>15</b>			
		Capital Gains and Losses	Fron	n Sales or Excha	nges of Proper	ty	I			
Enter only the capital gains and losses from property sales or exchanges that are from sources 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		(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)  (b) Date a mm/dd.		(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).		
	nd losses on Schedule D									
Report	property sales or									
	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16				17	(			
on Schedule D (Form 1040), Form 4797, or both.		<b>18 Capital gain.</b> Combine columns (f) and (g) of line		ter the net gain here						

# SCHEDULE OI (Form 1040-NR)

**Other Information** 

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

2021 Attachment Sequence No. 7C

Your identifying number

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

► Attach to Form 1040-NR. ► Answer all questions.

NI	TLAY NIGAM 777-43-4412											
Α		Of what country or countries w	vere you a citizen or nationa	al during the tax	year?	INDIA						
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							⊠ No			
		If you answer "Yes" to (1) or (2)	•									
E		If you had a visa on the last dimmigration status on the last c	lay of the tax year, enter ye	our visa type. If y	you di		•					
F		Have you ever changed your v	isa type (nonimmigrant stat					☐ Yes	⊠ No			
		If you answered "Yes," indicate	e the date and nature of the	e change ►								
G	List all dates you entered and left the United States during 2021. See instructions.											
	Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, check the box for Canada or Mexico and skip to item H											
		Date entered United States mm/dd/yy  Date departed United States mm/dd/yy  Date entered United States mm/dd/yy						eparted United States mm/dd/yy				
н		Cive number of days (including	vecetion nonworkdove and		L	propert in the United (	Ptotoo duringu					
п		Give number of days (including										
ī		2019	roturn for any prior year?	, ai	IU 202	333	··	X Yes	□No			
1								<u> 162</u>				
J	If "Yes," give the latest year and form number you filed ►											
		If "Yes," did the trust have a L										
		U.S. person, or receive a contr						☐ Yes	☐ No			
Κ		Did you receive total compens	ation of \$250,000 or more	during the tax ye	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 th					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	1 ',					
						ciaimed in prior tax ye	ars income	iii cuiteiit 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	<b>&gt;</b>					
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:	•		-							
1	١.	This is the first year you are may with a U.S. trade or business u							onnected			
2	2.	You have made an election in							e United			
	_	States as effectively connected										

#### SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

# **Capital Gains and Losses**

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

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

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2021

Attachment Sequence No. **12** 

	(s) shown on return LAY NIGAM				ocial se -43-	ecurity number 4412
	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional					
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets	Held One Year	or Less (s	ee ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) (e) Proceeds Cost (sales price) (or other basis)		(g) Adjustments to gain or loss from Form(s) 8949, Part line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	68.	64.			4.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (lo	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions		-		6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	4.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets I	Held More Than	One Year	(see	instructions)
See lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustme to gain or los		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colur	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	-	-		14	(
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	olumn (h). Then, a	o to Part III		

BAA

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

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 4. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

## Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

Name(s) shown on return 777-43-4412 NILAY NIGAM

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	(b) Date acquired	<b>(c)</b> Date sold or	r Proceeds S	(e) Cost or other basis. See the <b>Note</b> below		(h) Gain or (loss). Subtract column (e)		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g)	
ROBINHOOD CRYPTO LLC	01/01/21	12/31/21	63.	60.			3.	
ROBINHOOD SECURITIES LLC	01/01/21	12/31/21	5.	4.			1.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶			68.	64.			4.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.