## 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

Subm	ission Identification Number (SID)						
Taxpaye	er's name	Social securi	ty numl	per			
HAR	IKRISHNAN GIRIKUMAR	175-43-6293					
Spouse	's name	Spouse's soo	ial seci	urity numbe	er		
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r vear vou a	re au	thorizing	1)		
	whole dollars only on lines 1 through 5.	your you a	10 44	triorizirig	1-)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	54	1,543.		
2	Total tax		2		1,983.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7	7,782.		
4	Amount you want refunded to you		4		2,799.		
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	ırn)		
my know return to send for any Agent payme authori payme busine taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abore (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmand my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of the interval of the interval 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 Industry of the payment (settlement) date. I also authorize the financial institutions involved in the corrective confidential information necessary to answer inquiries and resolve issues related to the pain of the payment (September 1) below is my signature for the income tax return (original or amended) I are a support of the payment (September 1) and the payment (September 1) and the payment (September 1) and the payment (September 2) and the payment of the payment (September 2) and the payment (September 2) and the payment of the payment of the payment (September 2) and the payment of the paymen	we are the am- itter, or electro- ection of the to .S. Treasury a icated in the to on to debit the e the authoriza- uests must be processing of payment. I fur	ounts for the counts of the co	from the inturn original sion, (b) to designate control sector this according to the control of	ncome tax ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the		
	nic Funds Withdrawal Consent.  Nyer's PIN: check one box only						
X		my PIN 3	6 2	2 9 3	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	r En		digits, but er all zeros	as my		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholow.						
Yours	signature ▶ Date ▶						
Snous	se's PIN: check one box only						
	I authorize to enter or generate	mv PIN			as my		
	ERO firm name		ter five	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholow.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	III Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't ent	8 6 er all ze		9		
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of I	ax return (origi nitting this retu	nal or urn in a	amended) accordanc			
ERO's	s signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	Do So					

Department of the Treasury – Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return 2021 OMB No. 1545-0074 OMB No. 1545-0074 ORB No. 1545-0074 ORB No. 1545-0074

FIOTO		<b>U.S.</b> Nonresident	Aller	i Income Tax	Return	1/2		OMB N	lo. 154	5-0074	/ o	or staple in t	his space.
Filing Status		Single Married filing s	•	. , , _	Qualifyin	g widow	(er) (QV	/)					
Check only one box.		rou checked the QW box, enter the alifying person is a child but not you											
Your first name	and i	middle initial	La	ast name								ntifying nu uctions)	umber
HARIKRISH	INAN	1	G	IRIKUMAR						175	j – 4	3-6293	3
Home address	(numl	per and street or rural route). If you	ı have a	a P.O. box, see inst	ructions.			Apt. no.		Check	k if:	X Indivi	dual
2599 EVAN								225				Estat	e or Trust
City, town, or po	st off	ice. If you have a foreign address, al	so com	plete spaces below.	State		ZIP cod						
MORRISVIL					NC		27560						
Foreign country	nam	е	Foreig	gn province/state/co	ounty		Foreign	postal c	ode				
At any time dur	ing 20	021, did you receive, sell, exchang	e, or of	therwise dispose of	any financ	ial intere	st in an	y virtual o	curren	cy?		☐ Yes	X No
Dependents									(4)	✓ if a	ualifi	es for (see	inst )·
(see instructions):		(1) First name Last na	ıme	(2) Dependidentifying i	I		epende nship to	dent's		d tax credit Credi		Credit	for other ndents
If more than four												[	
dependents, see										<u> </u>		[	
instructions and										<u> </u>		<u> </u>	
check here ►										Щ			
Income	1a	Wages, salaries, tips, etc. Attach	,	,							a	54	,543.
Effectively	b	Scholarship and fellowship grant		` '		1	ent. See 	instruction	ons .	1	b		
Connected With U.S.	С	Total income exempt by a treaty L, line 1(e)		Schedule OI (Form	1040-NR), 	, Item	1c						
Trade or	<b>2</b> a	Tax-exempt interest	2a								2b		
Business	3a	Qualified dividends	3a		1						b		
	4a	IRA distributions	4a		1	able amo					lb		
	5a	Pensions and annuities	5a		b laxa	able amo	ount .				b		
	6	Reserved for future use Capital gain or (loss). Attach Sch	ا ماريام							. —	6 7		
	7 8	Other income from Schedule 1 (I		•						- —	8		
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b,									9	5 <i>4</i>	1,543.
	10	Adjustments to income:	r, and	o. Triio io your <b>tota</b>	i circonver			oome .					.,515.
	а	From Schedule 1 (Form 1040), lin	ne 26 .				10a						
	b	Reserved for future use					10b						
	С	Scholarship and fellowship grant					10c						
	d	Add lines 10a and 10c. These are	e your	total adjustments	to income				. ▶	10	0d		
	11	Subtract line 10d from line 9. Thi	s is yo	ur <b>adjusted gross</b> i	income .				. •	. 1	1	54	,543.
	12a	Itemized deductions (from Schresidents of India, standard deductions)					12a	12	,550	).			
	b	Charitable contributions for certa	in resid	dents of India. See i	nstructions		12b						
	С	Add lines 12a and 12b								12	2c	12	2,550.
	13a	Qualified business income deduc	ction fr	om Form 8995 or F	orm 8995- <i>i</i>	Α. [	13a						
	b	Exemptions for estates and trust	s only.	See instructions		[	13b						

Add lines 12c and 13c . . . . . . . . . . .

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

**c** Add lines 13a and 13b . . . .

14

13c

14

15

12,550.

41,993.

Form 1040-NR (2	2021)									Page 2
	16	Tax (see instructions). Check if	any from Form	(s): <b>1</b> 88	14 <b>2</b> 4972	2 3 🗌		16	4	,983.
	17	Amount from Schedule 2 (Form	n 1040), line 3					17		0.
	18	Add lines 16 and 17						18	4	,983.
	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		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. It	f zero or less,	enter -0				22	4	<u>,983.</u>
	23a	Tax on income not effectively from Schedule NEC (Form 104	,			<b>23</b> 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 <b>total tax</b>				. ▶	24	4 ,	,983.
	25	Federal income tax withheld fr	om:							
	а	Form(s) W-2				<b>25a</b> 7	7,782.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .					]	25d	7,	,782.
	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	orm 1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form	m 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 <b>to</b>	tal payments .		. ▶	33	7	,782.
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	2	,799.
	35a	Amount of line 34 you want re	funded to you	<b>J.</b> If Form 8888	is attached, check	k here		35a	2	<del>,</del> 799.
Direct deposit?	▶b	Routing number 1 2 2	Savings							
See instructions.	▶d	Account number 1 5 7	5 0 5 3	3 5 4 3	1 4					
	►e	If you want your refund check enter it here.				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	İ			
Third Party Designee	•	ou want to allow another structions	•				Complete b	elow.	⊠ No	
3	Designame			Phone no. ▶			nal identific er (PIN)	ation _		
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which									
Here	Your s	signature		Date	Your occupation				nt you an Io	
					Pro				N, enter it	here
	<u>/</u>				DATA ENGIN	EEK	(see ir	ıst.) ▶		
	Phone		D 1 .	Email addres	S	Data	DTIN			
Paid		rer's name	Preparer's si	•		Date	PTIN		Check if:	
Preparer		RIYA RAM SAGAR GUPTA TALLAM		A RAM SAGAR	GUPTA TALLAM	04/02/2022	P02082		Self-en	
Use Only		name ► GLOBAL TAXES							8)965-	
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN								<u>-10171</u>	.96

Form 1040-NR (2021)

#### **SCHEDULE NEC** (Form 1040-NR)

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

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ▶ Attach to Form 1040-NR.

2021	
Attachment Sequence No. <b>7B</b>	

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number HARIKRISHNAN GIRIKUMAR 175-43-6293 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify)

Nature of Income					(a) 10% (b)	<b>(b)</b> 15%	(c) 30%	(u) Other	(specify)	
			nature of income		(a) 1070	(b) 1370	(6) 30 %	%	%	
1	Dividends and divide	nd equ								
а	Dividends paid by U.	S. corp	oorations		1a					
b	Dividends paid by fo	reign c	orporations		1b					
С	Dividend equivalent p	ayment	ts received with respect to section 871(m)	) transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	orations	s		2b					
С	Other				2c					
3	Industrial royalties (p	atents,	trademarks, etc.)		3					
4	Motion picture or TV	copyri	ght royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6			natural resources royalties		6					
7	Pensions and annuiti	es.			7					
8	Social security benef	its			8					
9	Capital gain from line	18 be	low		9					
10	Gambling—Resident If zero or less, enter	s of Ca	anada only. Enter net income in column	(c).						
а										
b	Winnings Losses		 		10c					
11	Gambling winnings	-Reside	ents of countries other than Canada.		100					
•••	Note: Losses not allo	owed .	ents of countries other than Canada.		11					
12	Other (specify) ▶									
					12					
13	Add lines 1a through	12 in c	columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not ef	fective	ly connected with a U.S. trade or busine		. ,	• ( )			R, line 23a ► <b>15</b>	
			Capital Gains a	nd Losses F	rom	Sales or Excha	nges of Proper	ty		
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 gains and losses on Schedule D		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	ich statement of		(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).
(Form 1	•									
exchang	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),		Add columns (f) and (g) of line 16 .							
	797, or both.	18 0	Capital gain. Combine columns (f) and	d (g) of line 17	7. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 ▶ <b>18</b>	

# SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Internal Revenue Service (99)

**Other Information** 

 $\blacktriangleright$  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

Name shown on Form 1040-NR  Your identifying number											
HARI	KRISHNAN GIRIKUMAR				175-43-6	293					
Α	Of what country or countries were you a citizen or national during the tax year? INDIA										
В	In what country did you claim	residence for tax purposes	s during the tax ye	ear? United States							
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident	t) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
	. A U.S. citizen?										
2.	. A green card holder (lawful permanent resident) of the United States?										
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
E	If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax yearF1										
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		-								
	Note: If you are a resident of C check the box for Canada or				ent intervals,  Mexico						
	Date entered United States	Date departed United State	es	Date entered United State		rted United	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy	/уу				
н	Give number of days (including 2019	, 2020	, and	365							
I	Did you file a U.S. income tax					X Yes	☐ No				
	If "Yes," give the latest year ar						<b>S</b>				
J	Are you filing a return for a trus					∐ Yes	⊠ No				
	If "Yes," did the trust have a U.S. paragraph or receive a centre					□ v	□No				
1/	U.S. person, or receive a contr					∐ Yes	⊔ No ⊠ No				
K	Did you receive total compens		-			∐ Yes	No No				
	If "Yes," did you use an alterna			•		∐ Yes	_				
L	Income Exempt From Tax—If complete (1) through (3) below	. See Pub. 901 for more inf	formation on tax tr	eaties.							
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the				
	<b>(a)</b> Cou	ntry	(b) Tax treaty arti	cle (c) Number of month claimed in prior tax ye	, ,	ount of exe n current ta	•				
_	(e) Total. Enter this amount or				<b>&gt;</b>						
	Were you subject to tax in a fo					∐ Yes	∐ No				
3.	Are you claiming treaty benefit					∐ Yes	⊠ No				
	If "Yes," attach a copy of the C	competent Authority detern	nination letter to yo	our return.							
М	Check the applicable box if:	aldaman and all of the state of the			-104-1	6 1' '					
	This is the first year you are may with a U.S. trade or business u	under section 871(d). See in	nstructions	· · · · · · · · · · · · · · · · · · ·			<b>▶</b> □				
2.	You have made an election in States as effectively connected										