<u> 1040</u>	-1	Department of the Treasury—I U.S. Nonresident			Retur		<b>2</b> 1	OMB No	o. 15 <sup>4</sup>			se Only—I staple in th		
Filing Status		Single Married filing s			Qualifyi	ng widov	v(er) (QV	V)						
Check only one box.		you checked the QW box, enter the allifying person is a child but not you												
Your first name	our first name and middle initial			Last name						Your identifying number (see instructions)				
Llama address /		box and atreat or mired resists). If you	have a D C	) hav assinst	w. otiono			Ant no		Chapte if	<u> </u>	<del>-  </del>		
nome address (	numi	ber and street or rural route). If you	i nave a P.C	). DOX, See ITISI	ructions.			Apt. no.		Check if	· Г	_ Individ ☐ Estate		usi
City, town, or po	st offi	ice. If you have a foreign address, als	so complete	spaces below.	State		ZIP co	de						
Foreign country name			Foreign pro	Foreign province/state/county Foreign			Foreigr	gn postal code						
At any time duri	ng 20	021, did you receive, sell, exchange	e, or otherw	rise dispose of	any finan	cial inter	est in ar	ny virtual c	urrer	ncy?	[	Yes	□ N	lo
Dependents (see instructions):				(2) Dependent's (3) Dependent		•	ent's Child		)  if qualifies for (see inst.): d tax credit   Credit for other			er		
(See mondonons).		(1) First name Last na	me	ne identifying number relat		ionship to you		Office	depen		dents			
If more than four										<u> </u>	+	L	<u></u>	
dependents, see instructions and													-	_
check here ►										$\overline{\Box}$			<u> </u>	_
Income	1a	Wages, salaries, tips, etc. Attach	Form(s) W-	.2						. 1a				
Effectively	b	Scholarship and fellowship grant	s. Attach Fo	orm(s) 1042-S	or require	d statem	ent. See	instructio	ns .	. 1b				
Connected With U.S.	С	Total income exempt by a treaty L, line 1(e)	from Sche	edule OI (Form	1040-NR	), Item	1c							
Trade or	2a	Tax-exempt interest	2a		<b>b</b> Tax	cable inte	erest .			. 2b				
Business	3a	Qualified dividends	3a		<b>b</b> Ord	dinary di	vidends			. 3b				
	4a	IRA distributions	4a	<b>b</b> Taxable amount .						. 4b				
	5a	Pensions and annuities 5a b Taxable amount					. 5b				_			
	6	Reserved for future use								. 6				
	7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here . ▶ □							7					
	8	Other income from Schedule 1 (Form 1040), line 10							. 8					
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your <b>total effectively connected income</b>							▶ 9	┸				
	10	Adjustments to income:												
	а	From Schedule 1 (Form 1040), line 26												
	b	Reserved for future use												
	С	Scholarship and fellowship grants excluded												
	d	Add lines 10a and 10c. These are your total adjustments to income							▶ 10d					
	11	Subtract line 10d from line 9. This	s is your <b>ad</b>	justed gross i	income				. )	<b>►</b> 11				
	12a	Itemized deductions (from Sch	,		) or, for	certain	40.							

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

13a

14

15

**b** Charitable contributions for certain residents of India. See instructions

Qualified business income deduction from Form 8995 or Form 8995-A .

**b** Exemptions for estates and trusts only. See instructions . . . . .

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

**c** Add lines 12a and 12b . . . . . . . . . . . . . .

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

12b

13a

12c

13c

14

15

Form 1040-NR (	2021)								Pa	age 2
	16	Tax (see instructions). Check if	any from Form	n(s): <b>1</b>	814 <b>2</b> 🗌 49	72 3 🗌		16		
	17	Amount from Schedule 2 (For	m 1040), line 3	3				17		
	18	Add lines 16 and 17						18		
	19	9 Nonrefundable child tax credit or credit for other dependents from Schedule 8812 (Form 1040)								
	20	20 Amount from Schedule 3 (Form 1040), line 8								
	21	21 Add lines 19 and 20								
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22		
	23a	Tax on income not effective from Schedule NEC (Form 10	•			23a				
	b	Other taxes, including self-en line 21				23b				
	С	Transportation tax (see instru	ctions)			23c				
	d	Add lines 23a through 23c .					2	23d		
	24	Add lines 22 and 23d. This is	your <b>total tax</b>				▶ _	24		
	25	Federal income tax withheld f	rom:							
	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .					2	25d		
	е	Form(s) 8805					2	25e		
	f	Form(s) 8288-A					[	25f		
	g	Form(s) 1042-S					<del>  - </del>	25g		
	26	2021 estimated tax payments	and amount a	pplied from 20	020 return			26		
	27	Reserved for future use				27				
	28	Refundable child tax credit of 8812 (Form 1040)			t from Schedule	28				
	29	Credit for amount paid with Fe	orm 1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (For	m 1040), line 1	5		31				
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits						32		
-	33	Add lines 25d, 25e, 25f, 25g,	26, and 32. The	ese are your <b>t</b> e	otal payments		▶	33		
Refund	34									
	35a									
Direct deposit?	►b	Routing number								
See instructions.	<b>▶</b> d	Account number								
	►e	e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.								
	36 Amount of line 34 you want applied to your 2022 estimated tax . ▶ 36									
Amount	37	Amount you owe. Subtract li	ne 33 from line	e 24. For detail	s on how to pay,	see instructions	. ▶	37		
You Owe	38	Estimated tax penalty (see ins	tructions) .			38				
Third Party Designee	•	ou want to allow another nstructions	person to d	iscuss this r	eturn with the		Complete be	low.	☐ No	
	Desig name	gnee's ▶		Phone no. ▶			nal identificat er (PIN)	tion		Τ
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowled belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know									
	Your signature			Date	Your occupation	If the IF	RS sent	you an Ident	ity	
								, enter it here	<u> </u>	
	7						(see ins	t.) ▶		丄
	Phon		T _	Email addres	SS	T-	I			
Paid	Prepa	arer's name	Preparer's si	gnature		Date	PTIN		neck if:	
Preparer									Self-emplo	yed
Use Only	Firm's name ▶ Phone no									
Joe Only	Firm's address							<b></b>		