	/ <u> </u>	Department of the Treasury—U.S. Nonresident	Alien Ir	icome Tax	Retur	n <u>/</u>	<b>)                                    </b>	OMB	No. 15	45-0074	RS Use Only- or staple in	
Filing Status		Single Married filing	•		Qualifyi	ng widov	w(er) (QV	/)				
Check only one box.	,	ou checked the QW box, enter the alifying person is a child but not y										
Your first name and middle initial			Last r	Last name				Your id		Your ide	dentifying number	
									(see		ructions)	
Home address	(numl	ber and street or rural route). If you	u have a P.	O. box, see ins	tructions.			Apt. no	).	Check if	=	ridual te or Trust
City, town, or post office. If you have a foreign address, also			so complete	complete spaces below. State ZIP of			ZIP cod	le				
Foreign country	/ nam	e	Foreign p	reign province/state/county		Foreign		n postal code				
At any time dur	ing 20	021, did you receive, sell, exchang	ge, or other	wise dispose of	f any finan	cial inter	est in an	y virtual	curre	ncy?	☐ Yes	☐ No
Dependents	;			(a) Danar		dantia (O) D				🗸 if qual	ifies for (see	
(see instructions)	:	(1) First name Last name		(2) Depen identifying		1 '	(3) Dependent's relationship to you		Child	d tax credi		for other endents
		.,		, 5 4 44 12 2 2 2 2 2 2 2		<u> </u>	<u> </u>		иорс			
If more than four												
dependents, see instructions and	· —											
check here ►										ī		
Income	1a	Wages, salaries, tips, etc. Attach	n Form(s) W	1-2						. 1a		
Effectively	b	Scholarship and fellowship gran	` '						tions			
Connected With U.S.	С	Total income exempt by a treat L, line 1(e)		` ,	•		1c					
Trade or	2a	Tax-exempt interest	2a		 h Tay	 xable inte				. 2b		
Business	3a	Qualified dividends	3a		1							
Dusilless	4a	IRA distributions	4a					•	. 4b			
	5a	Pensions and annuities	<b>b</b> Taxable amount .					•	. 5b			
	6	Pensions and annuities							. 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>										
	10	Adjustments to income:										
	а	From Schedule 1 (Form 1040), li	ne 26				10a					
	b			10b								
	c											
	d								▶ 10d			
		Subtract line 10d from line 9. This is your <b>adjusted gross income</b>								► 11		
	11	Subtract line 100 from line 9. In	is is your a	ajustea gross	income						1	

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

13a

14

15

Charitable contributions for certain residents of India. See instructions

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

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

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

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

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

12b

13a

12c

13c

14

15

Form 1040-NR (	2021)							Page 2	
	16	Tax (see instructions). Check if	any from Form	n(s): <b>1</b>	314 <b>2</b> 49	72 3 🗌	1	6	
	17	Amount from Schedule 2 (For	m 1040), line 3	3			1	7	
	18	Add lines 16 and 17	1	8					
	19	Nonrefundable child tax credi	0)1	9					
	20	Amount from Schedule 3 (For	2	0					
	21	<b>21</b> Add lines 19 and 20							
	22	Subtract line 21 from line 18.	2	2					
	23a	Tax on income not effective from Schedule NEC (Form 10	•			23a			
	b	Other taxes, including self-enline 21				23b			
	С	Transportation tax (see instru	ctions)			23c			
	d	Add lines 23a through 23c .					2	3d	
	24	Add lines 22 and 23d. This is	your <b>total tax</b>				▶ 2	4	
	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	5d	
	е	Form(s) 8805					2	5e	
	f	Form(s) 8288-A					2	5f	
	g	Form(s) 1042-S					<del></del>	5g	
	26	2021 estimated tax payments	and amount a	pplied from 20	020 return		2	6	
	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						2	
-	33	Add lines 25d, 25e, 25f, 25g,	▶ 3	3					
Refund	34	If line 33 is more than line 24,	3	4					
	35a	Amount of line 34 you want re	. ▶ 🗌 🔼	5a					
Direct deposit? See instructions.	►b	Routing number							
	<b>▶</b> d	Account number							
	►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	37	Amount you owe. Subtract li	ne 33 from line	24. For detail	s on how to pay,	see instructions	. ▶ 3	7	
You Owe	38	Estimated tax penalty (see ins	tructions) .		🕨	38			
Third Party Designee	Do you want to allow another person to discuss this return with the IRS?  See instructions								
	Designee's name ▶		Phone Personal id no. ► number (PI				on ▶		
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 knowledge a belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
	Your signature			Date Your occupation			If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶		
	Phon	e no.		Email address					
Paid	Prepa	arer's name	Preparer's si	gnature		Date	PTIN	Check if:  Self-employed	
Preparer	Firm's name						Phone no.		
Use Only	Firm's name ▶ Phone no								