

Department of the Treasury  
Internal Revenue Service

beginning , 2019, and ending , 20

Please print  
or type

|  |           |                                       |   |
|--|-----------|---------------------------------------|---|
| Your first name and middle initial   | Last name | Identifying number (see instructions) |   |
| Present home address (number and street or rural route). If you have a P.O. box, see instructions.                           |           | Apt. no.                              | Check if: <input type="checkbox"/> Individual<br><input type="checkbox"/> Estate or Trust |
| City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. |           |                                       |   |
| Foreign country name   |           | Foreign province/state/county         | Foreign postal code   |

**Filing Status**

Check only one box.

|  |   |
|--|---|
| <b>1</b> <input type="checkbox"/> Reserved                 | <b>4</b> <input type="checkbox"/> Reserved                                |
| <b>2</b> <input type="checkbox"/> Single nonresident alien | <b>5</b> <input type="checkbox"/> Married nonresident alien               |
| <b>3</b> <input type="checkbox"/> Reserved                 | <b>6</b> <input type="checkbox"/> Qualifying widow(er) (see instructions) |
| Child's name ▶ <input type="text"/>                        |   |

**Dependents**

If more than four dependents, see instructions and check here.

| <b>7 Dependents:</b> (see instructions) | <b>(2)</b> Dependent's identifying number | <b>(3)</b> Dependent's relationship to you | <b>(4)</b> <input checked="" type="checkbox"/> if qualifies for (see instr.): |                             |
|---|---|--|---|-----------------------------|
| <b>(1)</b> First name Last name         |   |  | Child tax credit  | Credit for other dependents |
|   |   |  | <input type="checkbox"/>  | <input type="checkbox"/>    |
|   |   |  | <input type="checkbox"/>  | <input type="checkbox"/>    |
|   |   |  | <input type="checkbox"/>  | <input type="checkbox"/>    |
|   |   |  | <input type="checkbox"/>  | <input type="checkbox"/>    |

**Income Effectively Connected With U.S. Trade/Business**

Attach Form(s) W-2, 1042-S, SSA-1042S, RRB-1042S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld.

|  |            |  |
|--|------------|--|
| <b>8</b> Wages, salaries, tips, etc. Attach Form(s) W-2  |            | <b>8</b>                               |
| <b>9a</b> Taxable interest   |            | <b>9a</b>                              |
| <b>b</b> Tax-exempt interest. Do not include on line 9a  | <b>9b</b>  |  |
| <b>10a</b> Ordinary dividends  |            | <b>10a</b>                             |
| <b>b</b> Qualified dividends (see instructions)  | <b>10b</b> |  |
| <b>11</b> Taxable refunds, credits, or offsets of state and local income taxes (see instructions)  |            | <b>11</b>                              |
| <b>12</b> Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement (see instructions)                                  |            | <b>12</b>                              |
| <b>13</b> Business income or (loss). Attach Schedule C (Form 1040 or 1040-SR)  |            | <b>13</b>                              |
| <b>14</b> Capital gain or (loss). Attach Schedule D (Form 1040 or 1040-SR) if required. If not required, check here <input type="checkbox"/> |            | <b>14</b>                              |
| <b>15</b> Other gains or (losses). Attach Form 4797  |            | <b>15</b>                              |
| <b>16a</b> IRA distributions   | <b>16a</b> | <b>16b</b> Taxable amount (see instr.) |
| <b>17a</b> Pensions and annuities  | <b>17a</b> | <b>17b</b> Taxable amount (see instr.) |
| <b>18</b> Rental real estate, royalties, partnerships, trusts, etc. Attach Schedule E (Form 1040 or 1040-SR)                                 |            | <b>18</b>                              |
| <b>19</b> Farm income or (loss). Attach Schedule F (Form 1040 or 1040-SR)  |            | <b>19</b>                              |
| <b>20</b> Unemployment compensation  |            | <b>20</b>                              |
| <b>21</b> Other income. List type and amount (see instructions)  |            | <b>21</b>                              |
| <b>22</b> Total income exempt by a treaty from page 5, Schedule OI, item L (1(e))  | <b>22</b>  |  |
| <b>23</b> Combine the amounts in the far right column for lines 8 through 21. This is your <b>total effectively connected income</b>         |            | <b>23</b>                              |

**Adjusted Gross Income**

|   |           |           |
|---|-----------|-----------|
| <b>24</b> Educator expenses (see instructions)  | <b>24</b> |           |
| <b>25</b> Health savings account deduction. Attach Form 8889                                | <b>25</b> |           |
| <b>26</b> Moving expenses for members of the Armed Forces. Attach Form 3903                 | <b>26</b> |           |
| <b>27</b> Deductible part of self-employment tax. Attach Schedule SE (Form 1040 or 1040-SR) | <b>27</b> |           |
| <b>28</b> Self-employed SEP, SIMPLE, and qualified plans                                    | <b>28</b> |           |
| <b>29</b> Self-employed health insurance deduction (see instructions)                       | <b>29</b> |           |
| <b>30</b> Penalty on early withdrawal of savings  | <b>30</b> |           |
| <b>31</b> Scholarship and fellowship grants excluded  | <b>31</b> |           |
| <b>32</b> IRA deduction (see instructions)  | <b>32</b> |           |
| <b>33</b> Student loan interest deduction (see instructions)                                | <b>33</b> |           |
| <b>34</b> Add lines 24 through 33   |           | <b>34</b> |
| <b>35</b> <b>Adjusted Gross Income.</b> Subtract line 34 from line 23                       |           | <b>35</b> |

**Tax and Credits**

|  |           |
|--|-----------|
| <b>36</b> Reserved for future use  | <b>36</b> |
| <b>37</b> <b>Itemized deductions</b> from page 3, Schedule A, line 8           | <b>37</b> |
| <b>38</b> Qualified business income deduction. Attach Form 8995 or Form 8995-A | <b>38</b> |
| <b>39</b> Exemptions for estates and trusts only (see instructions)            | <b>39</b> |

Tax and Credits (continued)

Table with 3 columns: Description, Sub-entries, and Line Number. Rows include Taxable income (41), Tax (42), Alternative minimum tax (43), Excess advance premium tax credit repayment (44), Foreign tax credit (46), Credit for child and dependent care expenses (47), Retirement savings contributions credit (48), Child tax credit (49), Residential energy credits (50), Other credits from Form (51), Total credits (52), and subtraction of total credits (53).

Other Taxes

Table with 3 columns: Description, Sub-entries, and Line Number. Rows include Tax on income not effectively connected (54), Self-employment tax (55), Unreported social security and Medicare tax (56), Additional tax on IRAs (57), Transportation tax (58), Household employment taxes (59a, 59b), Taxes from Form 8959 (60), and Total tax (61).

Payments

Table with 3 columns: Description, Sub-entries, and Line Number. Rows include Federal income tax withheld (62a-d), 2019 estimated tax payments (63), Additional child tax credit (64), Net premium tax credit (65), Amount paid with request for extension (66), Excess social security and tier 1 RRTA tax withheld (67), Credit for federal tax on fuels (68), Credits from Form (69), Credit for amount paid with Form 1040-C (70), and Total payments (71).

Refund

Direct deposit? See instructions.

Table with 3 columns: Description, Sub-entries, and Line Number. Rows include Refund calculation (72), Refund details (73a-e), and Amount applied to 2020 estimated tax (74).

Amount You Owe

Table with 3 columns: Description, Sub-entries, and Line Number. Rows include Amount you owe (75) and Estimated tax penalty (76).

Third Party Designee

Table with 3 columns: Description, Sub-entries, and Line Number. Row includes designee information (77) with fields for name, phone, and PIN.

Sign Here

Keep a copy of this return for your records.

Table with 4 columns: Signature, Date, Occupation, and ID Protection PIN. Includes declaration text and instructions.

Paid Preparer Use Only

Table with 4 columns: Preparer's name/signature, Date, Check if self-employed, and PTIN. Includes fields for firm's name, EIN, and address.

**Schedule A—Itemized Deductions** (see instructions)

07

|                                  |  |   |           |           |
|----------------------------------|--|---|-----------|-----------|
| <b>Taxes You Paid</b>            | <b>1</b>   | State and local income taxes  |           |           |
|                                  | <b>a</b>   | State and local income taxes . . . . .  | <b>1a</b> |           |
|                                  | <b>b</b>   | Enter the smaller of line 1a and \$10,000 (\$5,000 if box 5 is checked) . . . . .   |           | <b>1b</b> |
| <b>Gifts to U.S. Charities</b>   | <b>2</b>   | Gifts by cash or check. If you made any gift of \$250 or more, see instructions . . . . .   | <b>2</b>  |           |
|                                  | <b>3</b>   | Other than by cash or check. If you made any gift of \$250 or more, see instructions. Individuals <b>must</b> attach Form 8283 if line 3 is over \$500 . . . . .                                      | <b>3</b>  |           |
|                                  | <b>4</b>   | Carryover from prior year . . . . .   | <b>4</b>  |           |
|                                  | <b>5</b>   | Add lines 2 through 4 . . . . .   |           | <b>5</b>  |
|                                  | <b>Caution:</b> If you made a gift and received a benefit in return, see instructions. |   |           |           |
| <b>Casualty and Theft Losses</b> | <b>6</b>   | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions. . . . . |           | <b>6</b>  |
|                                  | <b>7</b>   | Other—from list in instructions. List type and amount ▶<br>-----<br>-----<br>-----<br>-----<br>-----<br>-----<br>-----  |           | <b>7</b>  |
| <b>Total Itemized Deductions</b> | <b>8</b>   | Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on Form 1040-NR, line 37 . . . . .  |           | <b>8</b>  |

**Schedule NEC—Tax on Income Not Effectively Connected With a U.S. Trade or Business** (see instructions)

| Nature of income |   | Enter amount of income under the appropriate rate of tax (see instructions) |         |         |                     |   |
|------------------|---|---|---------|---------|---------------------|---|
|                  |   | (a) 10%   | (b) 15% | (c) 30% | (d) Other (specify) |   |
|                  |   |   |         |         | %                   | % |
| <b>1</b>         | Dividends and dividend equivalents:   |   |         |         |                     |   |
| <b>a</b>         | Dividends paid by U.S. corporations . . . . .   | <b>1a</b>   |         |         |                     |   |
| <b>b</b>         | Dividends paid by foreign corporations . . . . .  | <b>1b</b>   |         |         |                     |   |
| <b>c</b>         | Dividend equivalent payments received with respect to section 871(m) transactions . . . . .   | <b>1c</b>   |         |         |                     |   |
| <b>2</b>         | Interest:   |   |         |         |                     |   |
| <b>a</b>         | Mortgage . . . . .  | <b>2a</b>   |         |         |                     |   |
| <b>b</b>         | Paid by foreign corporations . . . . .  | <b>2b</b>   |         |         |                     |   |
| <b>c</b>         | Other . . . . .   | <b>2c</b>   |         |         |                     |   |
| <b>3</b>         | Industrial royalties (patents, trademarks, etc.) . . . . .  | <b>3</b>  |         |         |                     |   |
| <b>4</b>         | Motion picture or T.V. copyright royalties . . . . .  | <b>4</b>  |         |         |                     |   |
| <b>5</b>         | Other royalties (copyrights, recording, publishing, etc.) . . . . .   | <b>5</b>  |         |         |                     |   |
| <b>6</b>         | Real property income and natural resources royalties . . . . .  | <b>6</b>  |         |         |                     |   |
| <b>7</b>         | Pensions and annuities . . . . .  | <b>7</b>  |         |         |                     |   |
| <b>8</b>         | Social security benefits . . . . .  | <b>8</b>  |         |         |                     |   |
| <b>9</b>         | Capital gain from line 18 below . . . . .   | <b>9</b>  |         |         |                     |   |
| <b>10</b>        | Gambling—Residents of Canada only. Enter net income in column (c).<br><b>If zero or less, enter -0-.</b>  |   |         |         |                     |   |
| <b>a</b>         | Winnings _____  |   |         |         |                     |   |
| <b>b</b>         | Losses _____  | <b>10c</b>  |         |         |                     |   |
| <b>11</b>        | Gambling winnings—Residents of countries other than Canada.<br><b>Note:</b> Losses not allowed . . . . .  | <b>11</b>   |         |         |                     |   |
| <b>12</b>        | Other (specify) ▶ _____   | <b>12</b>   |         |         |                     |   |
| <b>13</b>        | Add lines 1a through 12 in columns (a) through (d) . . . . .  | <b>13</b>   |         |         |                     |   |
| <b>14</b>        | <b>Multiply line 13 by rate of tax at top of each column</b> . . . . .  | <b>14</b>   |         |         |                     |   |
| <b>15</b>        | <b>Tax on income not effectively connected with a U.S. trade or business.</b> Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 54 . . . . . ▶ | <b>15</b>   |         |         |                     |   |

**Capital Gains and Losses From Sales or Exchanges of Property**

|  | (a) Kind of property and description<br>(if necessary, attach statement of descriptive details not shown below)                     | (b) Date acquired<br>(mo., day, yr.) | (c) Date sold<br>(mo., day, yr.) | (d) Sales price | (e) Cost or other basis | (f) LOSS<br>If (e) is more than (d), subtract (d) from (e) | (g) GAIN<br>If (d) is more than (e), subtract (e) from (d) |
|--|---|--------------------------------------|----------------------------------|-----------------|-------------------------|--|--|
| 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 (Form 1040 or 1040-SR).<br><br>Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040 or 1040-SR), Form 4797, or both. |   |                                      |                                  |                 |                         |  |  |
| <b>17</b>  | Add columns (f) and (g) of line 16 . . . . .  |                                      |                                  |                 |                         | <b>17</b> ( )  |  |
| <b>18</b>  | <b>Capital gain.</b> Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above (if a loss, enter -0-) . ▶ |                                      |                                  |                 |                         |  | <b>18</b>  |

**Schedule OI—Other Information** (see instructions)

Answer all questions

- A** Of what country or countries were you a citizen or national during the tax year? \_\_\_\_\_
- B** In what country did you claim residence for tax purposes during the tax year? \_\_\_\_\_
- C** Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . .  **Yes**  **No**

- D** Were you ever:
1. A U.S. citizen? . . . . .  **Yes**  **No**
2. A green card holder (lawful permanent resident) of the United States? . . . . .  **Yes**  **No**

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 year. \_\_\_\_\_

**F** Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . .  **Yes**  **No**  
If you answered "Yes," indicate the date and nature of the change. ► \_\_\_\_\_

**G** List all dates you entered and left the United States during 2019. 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 . . . . .  **Canada**  **Mexico**

| Date entered United States<br>mm/dd/yy | Date departed United States<br>mm/dd/yy | Date entered United States<br>mm/dd/yy | Date departed United States<br>mm/dd/yy |
|--|---|--|---|
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |

**H** Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2017 \_\_\_\_\_, 2018 \_\_\_\_\_, and 2019 \_\_\_\_\_.

**I** Did you file a U.S. income tax return for any prior year? . . . . .  **Yes**  **No**  
If "Yes," give the latest year and form number you filed . . . . . ► \_\_\_\_\_

**J** Are you filing a return for a trust? . . . . .  **Yes**  **No**  
If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person? . . . . .  **Yes**  **No**

**K** Did you receive total compensation of \$250,000 or more during the tax year? . . . . .  **Yes**  **No**  
If "Yes," did you use an alternative method to determine the source of this compensation? . . . . .  **Yes**  **No**

**L** Income Exempt from Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.

1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.

| (a) Country | (b) Tax treaty article | (c) Number of months claimed in prior tax years | (d) Amount of exempt income in current tax year |
|-------------|------------------------|---|---|
|             |                        |   |   |
|             |                        |   |   |
|             |                        |   |   |

**(e) Total.** Enter this amount on Form 1040-NR, line 22. Do not enter it on line 8 or line 12 . . . . . ► \_\_\_\_\_

2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? . . . . .  **Yes**  **No**
3. Are you claiming treaty benefits pursuant to a Competent Authority determination? . . . . .  **Yes**  **No**  
If "Yes," attach a copy of the Competent Authority determination letter to your return.

- M** Check the applicable box if:
1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . ►
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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . ►