

1040-NR ATS Test Scenario 3
Taxpayer: Lisa Cranberry
SSN: 123-00-3333

Test Scenario 3 includes the following forms:

- Form 1040-NR
- Form W-2
- Form 1040-NR Schedule NEC
- Form 1040-NR Schedule OI
- Form 1040 Schedule 1
- Form 1040 Schedule E
- Form 8805
- Form 8854
- Form SSA-1042S

Form SSA-1042S

NameLine1Txt	Lisa Cranberry
PrimarySSN	123-00-3333
ForeignAddress	7613 Beatle Way London, UK NW61JD
SocSecBnftAmt	2,000.00
NetSocSecBnftAmt	2,000.00
TaxRt	.30
FederalIncomeTaxWithheldAmt	600.00
RefundAmt	200.00
NetTaxWithheldAmt	400.00

Additional information:

- The taxpayer expatriated in 2013. She has been a resident of the UK since January 1, 2014.
- The taxpayer received eligible deferred compensation in 2021 for services rendered to a US employer in previous years.
- The taxpayer received a distributive share of earnings in 2021 from the US partnership.
- The taxpayer received US social security benefits on which tax was withheld, but are exempt from income under the provisions of the US-UK tax treaty.

Filing Status

Single Married filing separately (MFS) Qualifying widow(er) (QW)

Check only one box.

If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial: **Lisa** Last name: **Cranberry** Your identifying number (see instructions): **123 00 3333**

Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: Individual Estate or Trust
7613 Beate Way

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
London

Foreign country name Foreign province/state/county Foreign postal code
UK **NW61JD**

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No

Dependents (see instructions):

(1) First name	Last name	(2) Dependent's identifying number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instr.): 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"/>

If more than four dependents, see instructions and check here

Income Effectively Connected With U.S. Trade or Business

1a Wages, salaries, tips, etc. Attach Form(s) W-2		1a
b Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement. See instructions		1b
c Total income exempt by a treaty from Schedule OI (Form 1040-NR), Item L, line 1(e)	1c	
2a Tax-exempt interest	2a	2b Taxable interest
3a Qualified dividends	3a	3b Ordinary dividends
4a IRA distributions	4a	4b Taxable amount
5a Pensions and annuities	5a	5b Taxable amount
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 total effectively connected income		9
10 Adjustments to income:		
a From Schedule 1 (Form 1040), line 26	10a	
b Reserved for future use	10b	
c Scholarship and fellowship grants excluded	10c	
d Add lines 10a and 10c. These are your total adjustments to income		10d
11 Subtract line 10d from line 9. This is your adjusted gross income		11
12a Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction. See instructions	12a	
b Charitable contributions for certain residents of India. See instructions	12b	
c Add lines 12a and 12b		12c
13a Qualified business income deduction from Form 8995 or Form 8995-A	13a	
b Exemptions for estates and trusts only. See instructions	13b	
c Add lines 13a and 13b		13c
14 Add lines 12c and 13c		14
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-		15

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	
17	Amount from Schedule 2 (Form 1040), line 3	17	
18	Add lines 16 and 17	18	
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3 (Form 1040), line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	
23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a	
b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	23b	
c	Transportation tax (see instructions)	23c	
d	Add lines 23a through 23c	23d	
24	Add lines 22 and 23d. This is your total tax	24	
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	
e	Form(s) 8805	25e	
f	Form(s) 8288-A	25f	
g	Form(s) 1042-S	25g	
26	2021 estimated tax payments and amount applied from 2020 return	26	
27	Reserved for future use	27	
28	Refundable child tax credit or additional child tax credit from Schedule 8812 (Form 1040)	28	
29	Credit for amount paid with Form 1040-C	29	
30	Reserved for future use	30	
31	Amount from Schedule 3 (Form 1040), line 15	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. These are your total payments	33	

Refund

34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid** **34**

35a Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here **35a**

Direct deposit? **b** Routing number _____ **c** Type: Checking Savings

See instructions. **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 of line 34 you want **applied to your 2022 estimated tax** **36**

Amount You Owe

37 **Amount you owe**. Subtract line 33 from line 24. For details on how to pay, see instructions **37** **5,516**

38 Estimated tax penalty (see instructions) **38**

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

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 and 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 *Lisa Cranberry* Date **3/15/2022** Your occupation _____ If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____


Phone no. _____ Email address _____

Paid Preparer Use Only

Preparer's name **Tim Fields** Preparer's signature *Tim Fields* Date **3/12/2022** PTIN _____ Check if: Self-employed

Firm's name **Forever LLC** Phone no. **203-111-4444**

Firm's address **1500 Cook Avenue Stamford, CT 06901** Firm's EIN **00-5556664**

		a Employee's social security number 123-00-3333		OMB No. 1545-0008		Safe, accurate, FAST! Use				Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN) 00-5559991				1 Wages, tips, other compensation 2,800,000		2 Federal income tax withheld 995,000					
c Employer's name, address, and ZIP code Cross Athletics 5215 Wembley Place London, UK NW61JD				3 Social security wages		4 Social security tax withheld					
				5 Medicare wages and tips		6 Medicare tax withheld					
				7 Social security tips		8 Allocated tips					
d Control number				9		10 Dependent care benefits					
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a See instructions for box 12			
Lisa Cranberry 7613 Beatle Way London, UK NW61JD						13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b			
						14 Other		12c			
								12d			
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** Wage and Tax Statement

2021

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.

This information is being furnished to the Internal Revenue Service.

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

Department of the Treasury
Internal Revenue Service (99)

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

▶ Go to www.irs.gov/Form1040NR for instructions and the latest information.
▶ Attach to Form 1040-NR.

OMB No. 1545-0074

2021
Attachment
Sequence No. **7B**

Name shown on Form 1040-NR

Lisa Cranberry

Your identifying number

123-00-3333

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)	
					%	%
1 Dividends and dividend equivalents:						
a Dividends paid by U.S. corporations	1a					
b Dividends paid by foreign corporations	1b					
c Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2 Interest:						
a Mortgage	2a					
b Paid by foreign corporations	2b					
c Other	2c					
3 Industrial royalties (patents, trademarks, etc.)	3					
4 Motion picture or TV copyright royalties	4					
5 Other royalties (copyrights, recording, publishing, etc.)	5					
6 Real property income and natural resources royalties	6					
7 Pensions and annuities	7					
8 Social security benefits	8			1,700		
9 Capital gain from line 18 below	9					
10 Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-.						
a Winnings						
b Losses	10c					
11 Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed	11					
12 Other (specify) ▶	12					
13 Add lines 1a through 12 in columns (a) through (d)	13					
14 Multiply line 13 by rate of tax at top of each column	14					
15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a ▶	15					

Capital Gains and Losses From Sales or Exchanges of Property

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

**SCHEDULE OI
(Form 1040-NR)**

Department of the Treasury
Internal Revenue Service (99)

Other Information

▶ 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

Lisa Cranberry

123-00-3333

- A** Of what country or countries were you a citizen or national during the tax year? UK
- B** In what country did you claim residence for tax purposes during the tax year? UK
- C** Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Yes No
- D** Were you ever:
- A U.S. citizen? Yes No
 - 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. Visa Waiver
- 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 ▶ 1-3-2013 Expatriation
- 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. Canada Mexico

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy
01/26/21	01/28/21
03/12/21	03/16/21
04/25/21	04/26/21
05/08/21	05/10/21

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy
06/20/21	06/22/21
09/12/21	09/14/21
10/10/21	10/11/21
11/27/21	11/30/21

- H** Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2019 22, 2020 21, and 2021 28.
- 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 ▶ 2020-NR
- 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.
- 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 1c. Do not enter it on line 1a or line 1b ▶

- Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes No
 - 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:
- 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 ▶
 - 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 ▶

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2021
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
Lisa Cranberry

Your social security number
123-00-3333

Part 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, trusts, etc. Attach Schedule E	5	2,000
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling income	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	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	
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l	
m	Section 951(a) inclusion (see instructions)	8m	
n	Section 951A(a) inclusion (see instructions)	8n	
o	Section 461(l) excess business loss adjustment	8o	
p	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 1040, 1040-SR, or 1040-NR, line 8	10	2,000

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government 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			
	c Date of original divorce or separation agreement (see instructions) ▶			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
	a 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		
	c 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		
	e 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 adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

DRAFT AS OF
July 21, 2021
DO NOT FILE

**SCHEDULE E
(Form 1040)**

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

2021

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment
Sequence No. **13**

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

Name(s) shown on return

Your social security number

Lisa Cranberry

123-00-3333

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Yes No

B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A					
B					
C					
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A			A		<input type="checkbox"/>
B			B		<input type="checkbox"/>
C			C		<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
- 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:	A	B	C
3	Rents received	3			
4	Royalties received	4			
Expenses:					
5	Advertising	5			
6	Auto and travel (see instructions)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see instructions)	12			
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Depreciation expense or depletion	18			
19	Other (list) ▶	19			
20	Total expenses. Add lines 5 through 19	20			
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21			
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	()	()	()
23a	Total of all amounts reported on line 3 for all rental properties	23a			
b	Total of all amounts reported on line 4 for all royalty properties	23b			
c	Total of all amounts reported on line 12 for all properties	23c			
d	Total of all amounts reported on line 18 for all properties	23d			
e	Total of all amounts reported on line 20 for all properties	23e			
24	Income. Add positive amounts shown on line 21. Do not include any losses	24			
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	()		
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26			

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

Lisa Cranberry

123-00-3333

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations – Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198**. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section **Yes** **No**

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	Fish and Chips	P	<input type="checkbox"/>	00-1234567	<input type="checkbox"/>	<input type="checkbox"/>
B			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
C			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
D			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A				2,000
B				
C				
D				
29a Totals				
b Totals				
30	Add columns (h) and (k) of line 29a.			30
31	Add columns (g), (i), and (j) of line 29b.			31 ()
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31			32

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35	Add columns (d) and (f) of line 34a		35
36	Add columns (c) and (e) of line 34b		36 ()
37	Total estate and trust income or (loss). Combine lines 35 and 36		37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) – Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q , line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q , line 1b	(e) Income from Schedules Q , line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835 . Also, complete line 42 below	40
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5 ▶	41
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43

**Foreign Partner's Information Statement
 of Section 1446 Withholding Tax**

▶ Go to www.irs.gov/Form8805 for instructions and the latest information.

For partnership's calendar year _____, or tax year beginning _____, 20____, and ending _____, 20____			
1a Foreign partner's name	b U.S. identifying number	5a Name of partnership	b U.S. Employer Identification Number (EIN)
Lisa Cranberry	123-00-3333	Fish and Chips	00-1234567
c Address (if a foreign address, see instructions)		c Address (if a foreign address, see instructions)	
7613 Beatle Way London, UK NW61JD		42579 Prince Street London, UK NW61JD	
2 Account number assigned by partnership (if any)		6 Withholding agent's name. If partnership is also the withholding agent, enter "SAME" and do not complete line 7.	
3 Type of partner (specify—see instructions) ▶		SAME	
4 Country code of partner (enter two-letter code—see instructions)		7 Withholding agent's U.S. EIN	
8a Check if the partnership identified on line 5a owns an interest in one or more partnerships ▶ <input type="checkbox"/>			
b Check if any of the partnership's effectively connected taxable income (ECTI) is exempt from U.S. tax for the partner identified on line 1a ▶ <input type="checkbox"/>			
9 Partnership's ECTI allocable to partner for the tax year (see instructions)		9	2,000
10 Total tax credit allowed to partner under section 1446 (see instructions). Individual and corporate partners: Claim this amount as a credit against your U.S. income tax on Form 1040-NR, Form 1120-F, etc.		10	406

Schedule T—Beneficiary Information (see instructions)

11a Name of beneficiary	c Address (if a foreign address, see instructions)
b U.S. identifying number of beneficiary	
12 Amount of ECTI on line 9 to be included in the beneficiary's gross income (see instructions)	12
13 Amount of tax credit on line 10 that the beneficiary is entitled to claim on its return (see instructions)	13

Initial and Annual Expatriation Statement

For calendar year 2021 or other tax year beginning _____, 2021, and ending _____, 20

▶ Go to www.irs.gov/Form8854 for instructions and the latest information.
 ▶ Please print or type.

Name Lisa Cranberry Identifying number (see instructions) 123-00-3333

Part I General Information. For all filers.

- 1 Mailing address and telephone number where you can be reached after expatriation 7613 Beattie Way London, UK NW61JD
11 479 333 0000
- 2 Address of principal foreign residence (if different from line 1) _____
- 3 Country of tax residence (if different from line 2) _____
- 4 Check the box that applies. See instructions.
 - Initial expatriation statement for persons who expatriated in 2021. Complete Part II.
 - Annual expatriation statement for persons who expatriated before 2021. Complete Part III.
- 5 Date of expatriation under section 877A(g)(3) for expatriating citizens and long-term residents. See instructions.
 - Citizen _____
 - Long-term resident _____
 - Long-term resident with dual residency in a treaty country. Date commencing to be treated, for tax purposes, as a resident of the treaty country 1-1-2013
- 6 List all countries (including the United States) of which you are a citizen (see instructions).
 - a Name of country UK
 - b Date you became a citizen of each country listed in line 6a (see instructions). 2-1-1964
- 7 How you became a U.S. citizen By birth By naturalization
- 8 Date you became a U.S. lawful permanent resident _____

Part II Initial Expatriation Statement for Persons Who Expatriated in 2021

Section A Expatriation Information

- 1 Enter your U.S. income tax liability (after foreign tax credits) for the 5 tax years ending before the date of your expatriation.

1st Year	2nd Year	3rd Year	4th Year	5th Year
Before Expatriation	Before Expatriation	Before Expatriation	Before Expatriation	Before Expatriation
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
- 2 Enter your net worth on the date of your expatriation for tax purposes \$ _____
- 3 Did you become at birth a U.S. citizen and a citizen of another country, and do you continue to be a citizen of, and taxed as a resident of, that other country? Yes No
- 4 If you answered "Yes" to question 3, have you been a resident of the United States for not more than 10 of the last 15 tax years (including the year of your expatriation)? Yes No
- 5 Were you under age 18½ on the date you expatriated and have you been a U.S. resident for not more than 10 tax years? Yes No
- 6 Do you certify under penalties of perjury that you have complied with all of your tax obligations for the 5 preceding tax years? See instructions Yes No

Section B **Balance Sheet**

List in U.S. dollars the fair market value and the U.S. adjusted basis of your assets and liabilities as of your expatriation date. For Lines 6 and 7, list in U.S. dollars the present value of your pensions and deferred compensation interests as of your expatriation date. For more details, see the instructions.

Assets		(a) Fair market value (FMV)	(b) U.S. adjusted basis
1	Cash, including bank deposits		
2	Marketable stock and securities issued by U.S. companies		
3	Marketable stock and securities issued by foreign companies		
4	Nonmarketable stock and securities issued by U.S. companies		
5	Nonmarketable stock and securities issued by foreign companies		
a	Separately state stock issued by foreign companies that would be controlled foreign corporations if you were still a U.S. citizen or permanent resident. See instructions		
b	Provide the name, address, and EIN, if any, of any such company		
6	Pensions or similar retirement arrangements (both U.S. and foreign). See instructions		
7	Deferred compensation (including stock options). See instructions		
8	Partnership interests. See instructions		
9	Assets held in trust. See instructions		
10	Beneficial interests in trusts not included in line 9. See instructions		
11	Intangibles used in the United States		
12	Intangibles used outside the United States		
13	Loans to U.S. persons		
14	Loans to foreign persons		
15	Real property located in the United States		
16	Real property located outside the United States		
17	Business property located in the United States.		
18	Business property located outside the United States.		
19	Other assets. See instructions		
20	Total assets. Add lines 1 through 5 and lines 6 through 19. Don't include amounts on line 5a in this total		
Liabilities		Amount	
21	Installment obligations.		
22	Mortgages, etc.		
23	Other liabilities. See instructions		
24	Total liabilities. Add lines 21 through 23		
25	Net worth. Subtract line 24 from line 20, column (a)		

Section C | **Property Owned on Date of Expatriation**

Don't complete Section C if:

- Your average net income tax liability for the 5 tax years immediately before expatriation (see line 1 in Section A) wasn't more than \$172,000, your net worth on the date of your expatriation (see line 2 in Section A) was under \$2 million, and you checked **"Yes"** on line 6 in Section A;
- In Section A, you checked **"Yes"** on lines 3, 4, and 6; or
- In Section A, you checked **"Yes"** on lines 5 and 6.

- 1a** Do you have any **eligible deferred compensation items**? Checking the "Yes" box is an irrevocable waiver of any right to claim any reduction in withholding for such eligible deferred compensation item under any treaty with the United States **Yes** **No**
- b** Do you have any **ineligible deferred compensation items**? If "Yes," you must include in income the present value of your account on the day before your expatriation date **Yes** **No**
- c** Do you have an interest in a **specified tax deferred accounts**? If "Yes," you must include in income the amount of your entire interest in the account on the day before your expatriation date **Yes** **No**
- d** Are you a beneficiary of a **nongrantor trust**? See instructions **Yes** **No**
- Check this box to elect under section 877A(f)(4)(B) to be treated as having received the value of your entire interest in the trust (as determined for purposes of section 877A) as of the day before your expatriation date. Attach a copy of your valuation letter ruling issued by the IRS. See instructions.
- 2** Recognition of gain or loss on the deemed sale of mark-to-market property. **Caution: Don't include in column (a) any property described on line 1a, 1b, 1c, or 1d.**

Complete column (g) only if you are deferring tax on gain from any property listed in column (a).

(a) Description of property	(b) Fair market value on day before date of expatriation	(c) Cost or other basis*	(d) Gain or (loss). Subtract (c) from (b)	(e) Gain after allocation of the exclusion amount (see instructions)	(f) Form or Schedule on which gain or loss is reported	(g) Amount of tax deferred (attach computations)
3 Total. Add the amounts in column (d) and column (e)						
4 Total tax deferred. Add the amounts in column (g). Enter here and on Part II, Section D, line 5						

* You must identify as "(h)(2)" any property for which you are making the special basis election under section 877A(h)(2). This election is irrevocable. See the instructions for Part II, Section C, line 2, column (c).

Section D | **Deferral of Tax**

Election to defer tax. You can defer tax only if you have provided adequate security. Adequate security is described in the instructions.

- 1** Are you electing to defer tax under section 877A(b)?
 Checking the "Yes" box is an irrevocable waiver of any right under any treaty of the United States that would prevent assessment or collection of any tax imposed because of section 877A **Yes** **No**

If you checked the "Yes" box, continue to line 2. Otherwise, don't complete lines 2 through 5.

2	Enter the total tax you would have reported, absent the deferral election, on Form 1040 or 1040-SR, line 24, for the part of the year including the day before the expatriation date absent the deferral election	2	
3	Enter the total tax for the same part of the tax year determined without regard to the amounts attributable to section 877A(a). Attach computation	3	
4	Subtract line 3 from line 2. This is the amount of tax eligible for deferral	4	
5	Enter the total tax deferred from Part II, Section C, line 4, column (g)	5	
	<ul style="list-style-type: none"> • If you are filing Form 1040 or 1040-SR, enter this amount in brackets to the left of the entry space for line 24. Identify as "EXP." • If you are filing Form 1040-NR, enter this amount in brackets to the left of the entry space for line 24. Identify as "EXP." 		

Part III | **Annual Expatriation Statement for Persons Who Expatriated Before 2021**

- If you made an election to defer the payment of tax, complete line 1.
 - If you have an item of eligible deferred compensation, complete line 2.
 - If you are a beneficiary of a nongrantor trust, complete line 3.
- 1** Complete columns (a), (b), and (c) for all property on which you deferred tax on a prior year Form 8854. Complete column (d) for any property you disposed of in 2021 and see the instructions for Part III.

(a) Description of property	(b) Amount of mark-to-market gain or (loss) reported on prior year Form 8854	(c) Amount of tax deferred on prior year Form 8854	(d) Date of disposition (if any)

Part III Annual Expatriation Statement for Persons Who Expatriated Before 2021 *(continued)*

2 Did you receive any distributions of eligible deferred compensation items for 2021? **Yes** **No**
 If "Yes," enter the amount of distribution(s) and amount withheld at source, if any, below.

	Amount of distribution	Amount withheld at source, if any
1	2,800,000	995,000
2		
3		

3 Did you receive any distributions from a nongrantor trust for 2021? **Yes** **No**
 If "Yes," enter the amount of distribution(s) and amount withheld at source, if any, below.

	Amount of distribution	Amount withheld at source, if any
1		
2		
3		

Sign Here Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than filer) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.