

1040NR ATS Test Scenario 1
Taxpayer: Sam Grape
SSN: 123-00-1111

Test Scenario 1 includes the following forms:

- **Form 1040NR**
- **Form 1042-S**
- **Form 8888**

Additional Information:

- **Nonresident alien, using the simplified refund method.**
- **The taxpayer signed the return using a self-select signature pin method.**

beginning 1-1, 2018, and ending 12-31, 2018

Identifying number (see instructions) 123-00-1111
Your first name and initial Sam
Last name Grape
Present home address (number and street or rural route). If you have a P.O. box, see instructions. 4752 Lomax Boulevard
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. Budapest
Foreign country name HU
Foreign province/state/county
Foreign postal code 1011

Filing Status
1 [] Reserved
2 [x] Single nonresident alien
3 [] Reserved
4 [] Reserved
5 [] Married nonresident alien
6 [] Qualifying widow(er) (see instructions)
Child's name

Dependents
7 Dependents: (see instructions)
(1) First name Last name
(2) Dependent's identifying number
(3) Dependent's relationship to you
(4) [x] if qualifies for (see instr.):
Child tax credit
Credit for other dependents

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

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

Tax and Credits
36 Amount from line 35 (adjusted gross income)
37 Itemized deductions from page 3, Schedule A, line 8
38 Qualified business income deduction (see instructions)
39 Exemptions for estates and trusts only (see instructions)

Tax and Credits (continued)

40 Add lines 37 through 39
41 Taxable income. Subtract line 40 from line 36. If zero or less, enter -0-
42 Tax (see instr.). Check if any is from Form(s): a 8814 b 4972 c
43 Alternative minimum tax (see instructions). Attach Form 6251
44 Excess advance premium tax credit repayment. Attach Form 8962
45 Add lines 42, 43, and 44
46 Foreign tax credit. Attach Form 1116 if required
47 Credit for child and dependent care expenses. Attach Form 2441
48 Retirement savings contributions credit. Attach Form 8880
49 Child tax credit and credit for other dependents (see instructions)
50 Residential energy credit. Attach Form 5695
51 Other credits from Form: a 3800 b 8801 c
52 Add lines 46 through 51. These are your total credits
53 Subtract line 52 from line 45. If zero or less, enter -0-

Other Taxes

54 Tax on income not effectively connected with a U.S. trade or business from page 4, Schedule NEC, line 15
55 Self-employment tax. Attach Schedule SE (Form 1040)
56 Unreported social security and Medicare tax from Form: a 4137 b 8919
57 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required
58 Transportation tax (see instructions)
59a Household employment taxes from Schedule H (Form 1040)
b Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required
60 Taxes from: a Form 8959 b Instructions; enter code(s)
61 Total tax. Add lines 53 through 60

Payments

62 Federal income tax withheld from:
a Form(s) W-2 and 1099
b Form(s) 8805
c Form(s) 8288-A
d Form(s) 1042-S
63 2018 estimated tax payments and amount applied from 2017 return
64 Additional child tax credit. Attach Schedule 8812
65 Net premium tax credit. Attach Form 8962
66 Amount paid with request for extension to file (see instructions)
67 Excess social security and tier 1 RRTA tax withheld (see instructions)
68 Credit for federal tax on fuels. Attach Form 4136
69 Credits from Form: a 2439 b Reserved c 8885 d
70 Credit for amount paid with Form 1040-C
71 Add lines 62a through 70. These are your total payments

Refund

Direct deposit? See instructions.

72 If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid
73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here
b Routing number
c Type: Checking Savings
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.
74 Amount of line 72 you want applied to your 2019 estimated tax

Amount You Owe

75 Amount you owe. Subtract line 71 from line 61. For details on how to pay, see instructions
76 Estimated tax penalty (see instructions)

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

Keep a copy of this return for your records.

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 Date Your occupation in the United States If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
Firm's name Firm's EIN
Firm's address Phone no.

Schedule A—Itemized Deductions (see instructions)

07

Taxes You Paid	1	State and local income taxes				
	a	State and local income taxes	1a			
	b	Enter the smaller of line 1a and \$10,000 (\$5,000 if married)			1b	
Gifts to U.S. Charities	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	2			
	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if the amount of your deduction is over \$500	3			
	4	Carryover from prior year	4			
	5	Add lines 2 through 4			5	
Casualty and Theft Losses	6	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			6	
Other Itemized Deductions	7	Other—from list in instructions. List type and amount ▶ _____				

		_____			7	
Total Itemized Deductions	8	Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on Form 1040NR, line 37			8	

DRAFT AS OF
August 22, 2018
DO NOT FILE

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)				
					%	%	%	%	
1 Dividends and dividend equivalents:									
a Dividends paid by U.S. corporations	1a		1,000						
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 T.V. 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								
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									
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 1040NR, line 54	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 (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(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—Other Information (see instructions)

Answer all questions

- A** Of what country or countries were you a citizen or national during the tax year? HU
- B** In what country did you claim residence for tax purposes during the tax year? HU
- 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. Not present in US no immigration status
- 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 2018. 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	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

- H** Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2016 0, 2017 0, and 2018 0.
- 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 1040NR, 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:
- 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. ▶

Allocation of Refund (Including Savings Bond Purchases)

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form8888 for the latest information.
▶ Attach to your income tax return.

2018
Attachment
Sequence No. **56**

Name(s) shown on return

Sam Grape

Your social security number

123-00-1111

Part I Direct Deposit

Complete this part if you want us to directly deposit a portion of your refund to one or more accounts.

1a	Amount to be deposited in first account (see instructions)	1a	100
b	Routing number <input type="text" value="024567891"/> ▶ c <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number <input type="text" value="1111111111111111"/>		
2a	Amount to be deposited in second account	2a	
b	Routing number <input type="text" value="221277735"/> ▶ c <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings		
d	Account number <input type="text" value="2222222222222222"/>		
3a	Amount to be deposited in third account	3a	
b	Routing number <input type="text" value=""/>		
d	Account number <input type="text" value=""/>		

Part II U.S. Series I Savings Bond Purchases

Complete this part if you want to buy paper bonds with a portion of your refund.



If a name is entered on line 5c or 6c below, co-ownership will be assumed unless the beneficiary box is checked. See instructions for more details.

4	Amount to be used for bond purchases for yourself (and your spouse, if filing jointly)	4	
5a	Amount to be used to buy bonds for yourself, your spouse, or someone else	5a	
b	Enter the owner's name (First then Last) for the bond registration		
c	If you would like to add a co-owner or beneficiary, enter the name here (First then Last). If beneficiary, also check here ▶ <input type="checkbox"/>		
6a	Amount to be used to buy bonds for yourself, your spouse, or someone else	6a	
b	Enter the owner's name (First then Last) for the bond registration		
c	If you would like to add a co-owner or beneficiary, enter the name here (First then Last). If beneficiary, also check here ▶ <input type="checkbox"/>		

Part III Paper Check

Complete this part if you want a portion of your refund to be sent to you as a check.

7	Amount to be refunded by check	7	
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Part IV Total Allocation of Refund

8	Add lines 1a, 2a, 3a, 4, 5a, 6a, and 7. The total must equal the refund amount shown on your tax return	8	
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