Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Subm	nission Identification Number (SID)			
Taxpay	yer's name	Social securit	y number	
NIS	SHANTH GADDAM	200-59-	-2403	
Spouse	e's name	Spouse's soc	ial security numb	er
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	 r year you a	re authorizing	g.)
Enter	whole dollars only on lines 1 through 5.	, ,	`	<u> </u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1 8	4,617.
2	Total tax		2 1	1,539.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 1	7,468.
4	Amount you want refunded to you		4	5,929.
5	Amount you owe		5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your ret	urn)
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abo (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm in my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Loto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutirization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the particular of the income tax return (original or amended) I a onlic Funds Withdrawal Consent.	itter, or electro- ection of the tr .S. Treasury ar icated in the ta on to debit the e the authoriza- uests must be processing of bayment. I furt	nic return original ansmission, (b) and its designate ax preparation sentry to this accuration. To revoke a received no lathe electronic per acknowledge.	nator (ERO) the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the
	ayer's PIN: check one box only			7
	▼ I authorize GLOBAL TAXES LLC to enter or generate	mv PIN 9	2 4 0 3	」 as mv
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	* Ent	er five digits, but n't enter all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.			
Your	signature ► <u>Nishanth Gaddam</u> Date ► _	03/11/2022		
Snou	0			
Spou	se's PIN: check one box only	may DINI		
L	I authorize to enter or generate to enter or generate	,	er five digits, but	」 as my
	signature on the income tax return (original or amended) I am now authorizing.		i't enter all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.			
Spou	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below	1		
Part	Certification and Authentication — Practitioner PIN Method Only			
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8		8 6 1 9 er all zeros	8 9
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income t rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subnements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in accordand	
EDO'	s signature ▶ Date ▶			
ENU	s signature ► Date ► ERO Must Retain This Form — See Instructions			
	LIV MUSE HELDIN HIS FULLI — SEE HISHUCHUIS			

Don't Submit This Form to the IRS Unless Requested To Do So

Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent one box. Your identifying number Your first name and middle initial Last name (see instructions) NISHANTH GADDAM 200-59-2403 Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual Estate or Trust 1713 NAVAJO SONG LANE City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code LEANDER 78641 Foreign country name Foreign province/state/county Foreign postal code At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes X No

Dependents							(4) 🗸	if qualifies	s for (see inst.):
(see instructions):		(1) First name Last n	ame	(2) Dependent's identifying number	(3) Deper relationshi		Child tax	· ·	Credit for other dependents
If more than four dependents, see									
instructions and									
check here ►									
Income	1a	Wages, salaries, tips, etc. Attac	h Form(s) W-	-2				1a	93,557.
Effectively	b	Scholarship and fellowship gran	its. Attach Fo	orm(s) 1042-S or required	d statement. S	See instruct	tions .	1b	
Connected With U.S.	С	Total income exempt by a treat L, line 1(e)	•	edule OI (Form 1040-NR), Item 1c				
Trade or	2a	Tax-exempt interest	2a	b Tax	cable interest			2b	
Business	За	Qualified dividends	3a	b Ord	dinary dividen	ds		3b	
	4a	IRA distributions	4a	b Tax	kable amount			4b	
	5a	Pensions and annuities	5a	b Tax	kable 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	-8,940.
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b	9	84,617.					
	10	Adjustments to income:							
	а	From Schedule 1 (Form 1040), I	ine 26		10a				
	b	Reserved for future use			10b				
	С	Scholarship and fellowship gran	its excluded		10c				
	d	Add lines 10a and 10c. These a	re your total	adjustments to income	e		. ▶	10d	
	11	Subtract line 10d from line 9. The	nis is your ad	justed gross income			. ▶	11	84,617.
,	12a	Itemized deductions (from Sorresidents of India, standard ded	chedule A (F luction. See i	form 1040-NR)) or, for one of the contractions Std. Dedn. US/Indi	certain la Treaty 12a	12	2 , 550.		
	b	Charitable contributions for cert					300.		
	c							12c	12,850.
	13a	Qualified business income dedu		orm 8995 or Form 8995	-A . 13a				,
	b	Exemptions for estates and trus							
	С	Add lines 13a and 13b	•					13c	
	14	Add lines 12c and 13c						14	12,850.

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

BAA

71,767.

15

Form 1040-NR (2021)											Page 2
	16	Tax (see instructions). Check if any from Form(s	s): 1 88	314 2	497	'2 3			16		11,	539.
	17	Amount from Schedule 2 (Form 1040), line 3							17			0.
	18	Add lines 16 and 17							18		11,	539.
	19	Nonrefundable child tax credit or credit for ot	her depender	nts from So	hedule	8812 (l	orm 104	0)	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, e	nter -0						22		11,	539.
	23a	Tax on income not effectively connected w from Schedule NEC (Form 1040-NR), line 15				23a						
	b	Other taxes, including self-employment tax, f line 21		*	,.	23b						
	С	Transportation tax (see instructions)				23c						
	d	Add lines 23a through 23c							23d			
	24	Add lines 22 and 23d. This is your total tax						. ▶	24		11,	539.
	25	Federal income tax withheld from:										
	а	Form(s) W-2				25a	17	,468.				
	b	Form(s) 1099				25b						
	С	Other forms (see instructions)				25c						
	d	Add lines 25a through 25c							25d		17,	468.
	е	Form(s) 8805							25e			
	f	Form(s) 8288-A							25f			
	g	Form(s) 1042-S							25g			
	26	2021 estimated tax payments and amount ap	plied from 20	20 return .					26			
	27	Reserved for future use				27						
	28	Refundable child tax credit or additional ch 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 tota	l other paym	ents and r	efunda	able cre	edits	. ▶	32			
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The	se are your to	tal payme	nts .			. ▶	33		17,	468.
Refund	34	If line 33 is more than line 24, subtract line 24	from line 33.	This is the	amour	nt you c	verpaid		34		5,	929.
	35a	Amount of line 34 you want refunded to you.		is attache	d, chec	k here			35a		5,	929.
Direct deposit?	▶b	Routing number 1 1 1 9 0 0 6		▶ c Type	e: X	Check	ng 🗌	Savings				
See instructions.	►d	Account number 5 8 0 9 0 2 2	8 6 5									
	►e	If you want your refund check mailed to an acenter it here.	ddress outsid	le the Unite	ed State	es not s	shown on	page 1,				
	36	Amount of line 34 you want applied to your 2	2022 estimate	ed tax .		36						
Amount	37	Amount you owe. Subtract line 33 from line 2	24. For details	s on how to	pay, s	ee insti	ructions	. ▶	37			
You Owe	38	Estimated tax penalty (see instructions)				38						
Third Party Designee	-	ou want to allow another person to dis	cuss this re	eturn with	the I	IRS? ▶	Yes.	Complete	below.	×	No	
2 00.900	Desig name		Phone no. ▶					nal identifi er (PIN)	cation			
Sign		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of p										
Here	Your signature Date Your occupation If the						IRS se					
						ection I	-	ter it	here			
	<u>/</u>			GADDAN	137@G	MAIL	.COM	(see	inst.) ▶			
	Phone		Email addres	S		- ·						
Paid		rer's name Preparer's sig				Date		PTIN		Chec		
Preparer	SYAM I	RIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA T	ALLAM	03/0	9/2022	P02082				nployed
Use Only		name▶ GLOBAL TAXES LLC						Phone n				
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's						Firm's E	IN ► 3	0-10	171	96	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
NISHANTH GADDAM

Your social security number
200-59-2403

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	1	
2 a	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, tre Schedule E	•	5	-8,940.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	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		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81	-	
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n	_	
0	Section 461(I) excess business loss adjustment	80	_	
р	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 10 1040-NR, line 8		10	-8,940.

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		. 11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
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	>	_	
С	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:			
а	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		
С	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		
е	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	24 j		
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 t here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE NEC (Form 1040-NR)

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

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

Attachment Sequence No. **7B**

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number NISHANTH GADDAM 200-59-2403

Linter 8	amount of income und	er trie appropr	Tate rate of tax. See instructions.				1		(d) Otho:	(specify)
	Nature of Income					(a) 10%	(b) 15%	(c) 30%	(a) Other	(specify)
1	Dividends and divide	and aquivalan	to:						70	90
ı a	Dividends and divide Dividends paid by U.				1a					
a b		•			1b					
					1c					
с 2		ayments rece	ived with respect to section 67 i(iii) transactions	10					
	Interest:				2a					
a					2b					
b					_					
С					2c					
3	-		marks, etc.)		3					
4			yalties		4					
5			ding, publishing, etc.)		5					
6			resources royalties		6					
7					7					
8	-				8					
9 10					9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0									
а	Winnings									
b					10c					
11	Gambling winnings-	-Residents of	f countries other than Canada.		11					
12	Other (specify) ▶									
					12					
13	Add lines 1a through	12 in columr	ns (a) through (d)		13					
14			top of each column		14					
15	Tax on income not ef	ffectively con	nected with a U.S. trade or busir						R, line 23a ► 15	
			Capital Gains	and Losses I	From	Sales or Excha	anges of Proper	ty		
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		(if n	find of property and description necessary, attach statement of riptive details not shown below)	(b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
(Form 1	•									
	property sales or ges that are effectively									
connec	ted with a U.S. business		olumns (f) and (g) of line 16					17		
on Schedule D (Form 1040), Form 4797, or both.		18 Capita	al gain. Combine columns (f) a	and (g) of line 17	7. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	er -0 ► 18	

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 Attachment Sequence No. **7C**

Name sh	nown on Form 1040-NR		Your identifying number					
NISH	ANTH GADDAM				200-59-2	403		
Α	Of what country or countries w							
В	In what country did you claim	residence for tax purposes	s during the tax ye	ear? United States				
С	Have you ever applied to be a	green card holder (lawful p	ermanent residen	t) of the United States? .		☐ Yes	⊠ No	
D	Were you ever:							
1.	A U.S. citizen?					☐ Yes	⊠ No	
2.	2. A green card holder (lawful permanent resident) of the United States?							
	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 yearF1							
F	Have you ever changed your v					☐ Yes	⊠ No	
	If you answered "Yes," indicat	e the date and nature of the	e change 🕨					
G	List all dates you entered and		_					
	Note: If you are a resident of C check the box for Canada or				ient intervals, Mexico			
	Date entered United States	Date departed United State	es	Date entered United State		arted United	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy		
					04-4			
н	Give number of days (including 2019	, 2020	, and	d 2021 365				
I	Did you file a U.S. income tax					X Yes	∐ No	
	If "Yes," give the latest year ar					□ v	▽ N -	
J	Are you filing a return for a trus					∐ Yes	⊠ No	
	If "Yes," did the trust have a U.S. person, or receive a contr					Yes	☐ No	
K	Did you receive total compens	·				☐ Yes	□ No No	
N.	If "Yes," did you use an alterna		-			☐ Yes	□ No	
	Income Exempt From Tax—If			•			_	
L	complete (1) through (3) below	. See Pub. 901 for more inf	formation on tax tr	reaties.	-			
1.	Enter the name of the country, amount of exempt income in the	e columns below. Attach Fo	orm 8833 if require	d. See instructions.				
	(a) Cou	ntry	(b) Tax treaty arti	cle (c) Number of month claimed in prior tax ye		nount of exe		
	(a) T-1-1 [1 11 11 11 11 11 11 11 11 11 11 11 1	- F 1040 ND " 1 5		d B d I				
^	(e) Total. Enter this amount of	•						
	Were you subject to tax in a fo					☐ Yes ☒ Yes	∐ No □ No	
٥.	Are you claiming treaty benefit	•	•			∠ res	□ NO	
B.A	If "Yes," attach a copy of the C	Joinpetent Authority detern	illiation letter to y	our return.				
M	Check the applicable box if: This is the first year you are m	aking an alaction to treat in	como from roal ar	concerts located in the Unit-	nd States as of	footivoly	onnoctod	
	This is the first year you are mount a U.S. trade or business u	under section 871(d). See in	structions				. ▶ 🗌	
2.	You have made an election in States as effectively connected							

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

2021

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

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

Name(s) shown on return Your social security number 200-59-2403 NISHANTH GADDAM Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I 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 Physical address of each property (street, city, state, ZIP code) Α H.NO.2-2-47/5, RAJAJI NAGAR HANAMKONDA WARANGAL, TELANGANA IN 506001 В C 1b Fair Rental Personal Use Type of Property For each rental real estate property listed QJV 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 (from list below) **Days Days** Α 365 Α 0 qualified joint venture. See instructions. В В С С Type of Property: 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:** Α 3 Rents received . 3 600. 4 4 Royalties received Expenses: Advertising 5 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 2,150. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 1,720. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest. 13 14 14 Repairs. 1,840. 15 1,980. 15 Supplies . Taxes 16 16 17 1,850. 17 18 Depreciation expense or depletion . . 18 Other (list) ----19 19 Total expenses. Add lines 5 through 19 20 20 9,540. 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 -8,940.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -8,940.) 600 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 23e Total of all amounts reported on line 20 for all properties 9,540. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 8,940. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-8,940.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

Form **8889**

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 52

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
NISHANTH GADDAM

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ► 200-59-2403

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions	⊠ Sel	f-only	☐ Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		0.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3		3,600.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		3,600.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		3,600.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		0.
8	Add lines 6 and 7	8		3,600.
9	Employer contributions made to your HSAs for 2021			
10	Qualified HSA funding distributions			
11	Add lines 9 and 10	11		83.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		3,517.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.			
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have sepa	rate l	HSAs,	complete
	a separate Part II for each spouse.			·
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess			
-	contributions (and the earnings on those excess contributions) included on line 14a that were			
	withdrawn by the due date of your return. See instructions	14b		
С	Subtract line 14b from line 14a	14c		
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this			
	amount in the total on Schedule 1 (Form 1040), Part I, line 8e	16		
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b		
Part			efore	
	completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.			ı
18	Last-month rule	18		
19	Qualified HSA funding distribution	19		
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form			
<u> </u>	1040), Part II, line 17d	21		