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

- Internal n	leveride 3et vice					
Submis	ssion Identification Number (SID)					
Taxpayer	r's name	Social secu	rity num	ber		
CHAN	IDAN KUMAR REDDY MANNEM	632-8	5-602	3		
Spouse's		Spouse's s			mber	
Part		year you	are au	thoriz	ing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1.4		112	42E
	Adjusted gross income		2			435. 949.
	Total tax		3			
	Amount you want refunded to you		4			<u>641.</u> 692.
	Amount you owe		5		<u> </u>	<u>092.</u>
Part		eep a co		our ı	eturi	n)
Under p my knov return (c to send for any o Agent tc paymen authoriz paymen busines taxes tc persona Electron Taxpay	wenalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) whedge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. o initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions active to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the payment information necessary to answer inquiries and resolve issues related to the payment information number (PIN) below is my signature for the income tax return (original or amended) I are information in the income tax return (original or amended) I are information or the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	I am now a se are the second of the S. Treasury cated in the n to debit the author ests must processing ayment. I fun now author and processing ayment are the area area area.	uthorizing mounts tronic retransmi and its tax prepare entry ization. be receiffed from the electronic and t	g, and from the turn or ssion, design oaratio to this Fo revolved no ectron cknowlend, if a digits, er all ze	to the ne incoiginato (b) the ated F n softwaccoubke (cab later ic payredge tapplica	best of ome tax or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the ble, my as my
C	ala DINI, alaask aya hay ayb					
Spous	e's PIN: check one box only	DINI				
	I authorize to enter or generate r	_	nter five	dinite		as my
	signature on the income tax return (original or amended) I am now authorizing.		lon't ente	•		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.		_			_
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	II Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9	6 6	$ _1 _2$	8 6	9
			nter all ze			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta sed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of In	tting this re	eturn in a	accord	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2022

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Ja	ın. 1–E	Dec. 31, 2022, or other tax year begin	nning		, 2022,	ending		, 20		See separate nstructions.
Filing Status		Single Married filing se	• •	,	-	ng surviving spouse			tate	☐ Trust
Check only one box.						•				
Your first name	e and	middle initial	Last na	ame				Your ic	_	ing number ons)
CHANDAN	KUMA	AR REDDY	MANN	EM				632-	-85-6	5023
Home address	(num	ber and street). If you have a P.O. bo	x, see ins	structions.						Apt. no.
107 SERR.	AVIS	TA ST								
City, town, or p	oost o	ffice. If you have a foreign address, a	also comp	lete spaces belo	w.		State		ZIP c	ode
MOORESVI	LLE						NC		281	17
Foreign countr	y nam	е	Foreign	n province/state/	county		Foreign	postal co	de	
Digital Asset		ny time during 2022, did you: (a) receivise dispose of a digital asset (or a						or (b) sell,		
Dependents	8						(4) C	heck the bo	x if qual	lifies for (see inst.):
(see instructions		(1) First name Last nam	0	(2) Depende identifying nu		(3) Relationship to y	Ch	ild tax cred	Credit for other	
		(I) First flatfle Last flatfl		identifying flui	TIDEI	(3) helationship to y	ou			dependents
If more than fou	r -									
dependents, se										
instructions and check here	 									
	4 -	T-t-	1 (:						\top	127 240
Income	1a	Total amount from Form(s) W-2, bo	,	,						127,240.
Effectively	b	Household employee wages not re								
Connected	С	Tip income not reported on line 1a	`	,						
With U.S.	d	Medicaid waiver payments not rep		. ,		,				
Trade or	e	Taxable dependent care benefits f		•						
Business	f	Employer-provided adoption bene		•				. 1f		
Attach	g	Wages from Form 8919, line 6 .								
Form(s) W-2,	h :	Other earned income (see instructi	,					. 1h		
1042-S, SSA-1042-S.	i	Reserved for future use						4:		
RRB-1042-S,		Reserved for future use				1 1		. <u>1j</u>		
and 8288-A	k	Total income exempt by a treaty fro				1 1				
here. Also attach	_	line 1(e)				1k		1-		127,240.
Form(s)	Z	1	2a	· · · · i	 b Toy	able interest		. 1z		127,240.
1099-R if	2a		3a	28.		linary dividends .		. 3b		29.
tax was withheld.	4a		ta	20.		able amount				
If you did not	ч а 5а	_	т а 5а			able amount				
get a Form	5a 6	Reserved for future use	_							
W-2, see	7									-2,764.
instructions.	8	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here Other income from Schedule 1 (Form 1040), line 10								-2,764. -11,070.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and								-11,070. 113,435.
	10	Addustments to income:	. J. 11113 13	your total ellet	Javely C			. 9		
	а	From Schedule 1 (Form 1040), line	26			10a				
	b	Reserved for future use								
	c	Reserved for future use								
	d	Enter the amount from line 10a. Th						. 100	1	
	11	Subtract line 10d from line 9. This		=						113,435.
	12	Itemized deductions (from Sched	dule A (Fo	rm 1040-NR)) or	, for cer	tain residents of Inc	lia, stand	ard		
		deduction (see instructions)				1 1	.US/India.Tr	-		12,950.
	13a	Qualified business income deducti						0.		
	b	Exemptions for estates and trusts	only (see i	instructions) .		13b				
	С	Add lines 13a and 13b								0.
	14									12,950.
	15	Subtract line 14 from line 11. If zer	o or less.	enter -0 This is	your tax	kable income		. 15	1	100,485.

Form 1040-NR (2	2022)									Page 2
Tax and	16	Tax (see instructions). Check if any from F	Form(s): 1 88	314 2	497	2 3			16	17,949.
Credits	17	Amount from Schedule 2 (Form 1040), li							17	0.
	18	Add lines 16 and 17							18	17,949.
	19	Child tax credit or credit for other deper	dents from Sched	ule 8812 (F	orm 10	40) .			19	
	20	Amount from Schedule 3 (Form 1040), li	ne 8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zero or le	ess, enter -0						22	17,949.
	23a	Tax on income not effectively connected	I with a U.S. trade	or business	s from					
		Schedule NEC (Form 1040-NR), line 15				23a				
	b	Other taxes, including self-employment	tax, from Schedule	e 2 (Form	1040),					
		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	17,949.
Payments	25	Federal income tax withheld from:								
	а	Form(s) W-2				25a	23	,641.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	23,641.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2022 estimated tax payments and amou	ınt applied from 20	21 return					26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Schedule	e 8812 (Form 1040))		28				
	29	Credit for amount paid with Form 1040-				29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 1040), li	ne 15			31				
	32	Add lines 28, 29, and 31. These are you							32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32	. These are your to	tal payme	ents .				33	23,641.
Refund	34	If line 33 is more than line 24, subtract li				•	-		34	5,692.
	35a	Amount of line 34 you want refunded to	and the second second						35a	5,692.
Direct deposit?	b	Routing number 0 5 3 0 0 0		с Туре	e: 🔀	Checki	ng L	Savings		
See instructions.	d	Account number 2 3 7 0 4								
	е	If you want your refund check mailed to	an address outsid	le the Unit	ed State	es not s	hown on	page 1,		
		enter it here.				1				
-	36	Amount of line 34 you want applied to y	our 2023 estimat	ed tax		36				
Amount	37	Subtract line 33 from line 24. This is the	•							
You Owe		For details on how to pay, go to www.irs	-	see instru	ctions .				37	
	38	Estimated tax penalty (see instructions)				38				S
Third	,	u want to allow another person to discus	s this return with th	ie IRS? Se	e instru	ctions.	Y€	es. Comp	lete bel	ow. 🛛 No
Party	Desig		Phone					nal identif	ication [
Designee	name		no.					er (PIN)	L	
		penalties of perjury, I declare that I have exami they are true, correct, and complete. Declaration								
Sign		•			•					ent you an Identity
Here	Your	signature	Date	Your occ	upation					PIN, enter it here
Here				SOFTWA	ARE E	NGIN	EER		inst.)	
	Phone no. Email address									
Paid	Prepa	rer's name Prepar	er's signature			Date		PTIN		Check if:
		VENKA	TA SAI PAVAN KU	JMAR DUDI	PALLI	02/2	1/2023	P0247	0833	Self-employed
Preparer	Firm's	s name VENKATABAL PANAKKUMAR IDUDIP	ALLI					Phone r		78)965-9522
Use Only	V									8-2145487

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

CHANDAN KUMAR REDDY MANNEM

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. 01
Your soc	ial security number
632-85	-6023

Par	t 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. Atta	ach Schedule E .	5	-11,070.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h	-	
i	Prizes and awards	8i	-	
j	Activity not engaged in for profit income	8j	-	
k	Stock options	8k	-	
ı	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	81	-	
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	00 (
	Pension or annuity from a nonqualifed deferred compensation plan or	8s (-	
t	a nongovernmental section 457 plan	0+		
		8t 8u	-	
u	Wages earned while incarcerated	ou		
Z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR		10	-11,070.
10	Combine lines 1 through / and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-11,070.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr			
	officials. Attach Form 2106	L	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	L	17	
18	Penalty on early withdrawal of savings	L	18	
19a	Alimony paid		I9a	
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	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
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	_		
J	Housing deduction from Form 2555	_		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)	-		
Z	Other adjustments. List type and amount:24z			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	,		23	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	1 01111 1040 01 1040-011, IIIIE 10, 01 1 01111 1040-1110, IIIIE 10a		2 0	

SCHEDULE NEC (Form 1040-NR)

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.

Attach

OMB No. 1545-0074

2022

Attachment
Sequence No. 7B

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR
CHANDAN KUMAR REDDY MANNEM
632-85-6023

=nter a	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:	1				70	70
-	Dividends paid by U.S. corporations	1a					
a	Dividends paid by foreign corporations	1b					
b	Dividend equivalent payments received with respect to section 871(m) transactions						
С		1c					
2	Interest:						
a	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	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					
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						
а	Winnings						
b	Losses	10c					
11	Gambling winnings – Residents of countries other than Canada.	11					
40	Note: Losses not allowed					+	
12	Other (specify):	40					
40		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 colur)-NR, line 23a 15	
	Capital Gains and Losses	From	Sales or Excha	inges of Propert	у	1	
osses t	Inly the capital gains and from property sales or ges that are from sources the United States and not (if necessary, attach statement of descriptive details not shown below) (b) Date acc mm/dd/y		(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).
effectiv	iffectively connected with a U.S. pusiness. Do not include a gain						
or loss	on disposing of a U.S. real						
propert gains a	y interest; report these nd losses on Schedule D						
Form 1							
	property sales or ges that are effectively						
connec	ted with a U.S. business 17 Add columns (f) and (g) of line 16				17	()	
	edule D (Form 1040), 18 Capital gain, Combine columns (f) and (g) of line 1						

SCHEDULE OI (Form 1040-NR)

Department of the Treasury Internal Revenue Service

Α

В

С

Name shown on Form 1040-NR

Were you ever:

1. A U.S. citizen?

Other Information OMB No. 1545-0074 Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR. Attachment Answer all questions. Sequence No. 7C Your identifying number CHANDAN KUMAR REDDY MANNEM 632-85-6023 Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States ⊠ No Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No ☐ Yes X No A green card holder (lawful permanent resident) of the United States?

۷.	A green card noider (lawful pe	,			<u> </u>	∠ NO
	If you answer "Yes" to (1) or (2	2), see Pub. 519, chapter 4,	for expatriation rules t	that apply to you.		
E	If you had a visa on the last immigration status on the last			didn't have a visa, enter		
F	Have you ever changed your	visa type (nonimmigrant sta	tus) or U.S. immigratio	n status?	🗌 Yes	✓ No
	If you answered "Yes," indicat	te the date and nature of th	e change:			
G	List all dates you entered and	left the United States durin				
	Note: If you're a resident of C check the box for Canada or				intervals, Mexico	
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	Da Da	te entered United States mm/dd/yy	Date departed Unite mm/dd/yy	d States
Н	Give number of days (including				-	
	2020	, 2021	, and 202	22 365		
I	Did you file a U.S. income tax	return for any prior year? .			🔀 Yes	☐ No
	If "Yes," give the latest year a	nd form number you filed:	104	ONR		\
J	Are you filing a return for a tru					⊠ No
	If "Yes," did the trust have a U.S. person, or receive a cont					□No
K	Did you receive total compens					□ No
ĸ	If "Yes," did you use an altern					□ No
L	Income Exempt From Tax—I			•		_
_	complete (1) through (3) below				treaty with a foreign	Country
1.	Enter the name of the country,				imed the treaty benef	it, and the
	amount of exempt income in the	ne columns below. Attach Fe	orm 8833 if required. S	ee instructions.		
	(a) Cou	ıntry	(b) Tax treaty article	(c) Number of months	(d) Amount of ex	
				claimed in prior tax years	income in current t	ax year
	(e) Total. Enter this amount of		•			
	Were you subject to tax in a fo	, ,	` '		_	☐ No
3.	Are you claiming treaty benefi				L Yes	⊠ No
	If "Yes," attach a copy of the	Competent Authority deterr	nination letter to your i	return.		
М	Check the applicable box if:	alder an alse (Control Control			04-4 11	
	This is the first year you are m with a U.S. trade or business	under section 871(d). See ir	nstructions			\square
2.	You have made an election in States as effectively connected					

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

Your social security number

Department of the Treasury Internal Revenue Service

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Name(s) shown on return

632-85-6023 CHANDAN KUMAR REDDY MANNEM

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 986. 636. 1,622. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 3,400.) 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -2,764. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** -2,764. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 2,764.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

Social security number or taxpayer identification number

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Attachment Sequence No. 12A

OMB No. 1545-0074

CHANDAN KUMAR REDDY MA	NNEM			632-85	-6023		
Before you check Box A, B, or C below statement will have the same informations broker and may even tell you which be	ation as Form	er you receive 1099-B. Eithei	ed any Form(s) 10s r will show whethe	99-B or substitute er your basis (usua	statement(s ally your cost) from your broke) was reported to	r. A substitute the IRS by your
Part I Short-Term. Transinstructions). For lo	ng-term tra gregate all s	nsactions, s hort-term tr	see page 2. ansactions rep	oorted on Form	(s) 1099-E	showing basi	s was
reported to the IRS Schedule D, line 1a							
You must check Box A, B, or C complete a separate Form 8949, for one or more of the boxes, com	page 1, for ea	ach applicab	le box. If you ha	ve more short-te	rm transact		
☒ (A) Short-term transactions☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas				e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
APEX CLEARING	01/01/22	12/31/22	1,003.	986.			17.
FIDELITY BROKERAGE SERVICES LLC	01/01/22	12/31/22	619.	0.			619.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

1,622.

636.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

986.

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.

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

CHAI	NDAN KUMAR REDDY MANNEM						632-8	5-6023	}
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			e C. See	instru	ctions. If you a	are an indi	vidual, rep	oort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(c)	10002 5	Soo inc	structions		. Y	es 🛛 No
	If "Yes," did you or will you file required Form(s) 1099?								es 🖂 No
<u>Б</u>	Physical address of each property (street, city, state, ZII				• •			. 🗀 10	35 <u> </u> NO
A	25-10-291, KESAVULU NAGAR NEAR NIPPO VE	EDAY	APA NEI	LLORE	, AN	DHRA PRAI	DESH II	N 5240	04
В									
С							T		
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa			nal Use nys	QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quaimed joint venture. See institu	ictions	o.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Lanc	t	7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Propert			
lnaar	mai			Α		В	162.		С
Incor 3	Rents received	3			20.	В			
4		4			۷0.				
	Royalties received	4							
⊑xρe 5	nses:	5							
	Advertising	6							
6	· · · · · · · · · · · · · · · · · · ·	7		1 2	ΕΛ				
7	Cleaning and maintenance	8		1,3	50.				
8	Commissions	9							
9	Insurance								
10	Legal and other professional fees	10		1 0	0.0				
11	Management fees	11		1,0	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13		2 -	<i></i> 0				
14	Repairs	14		3,5					
15	Supplies	15		3,1	∠∪.				
16	Taxes	16		2 -	<i>c</i> 0				
17	Utilities	17		2,5	60.				
18	Depreciation expense or depletion	18							
19	Other (list)	19		11 г	0.0				
20	Total expenses. Add lines 5 through 19	20		11,5	90.				
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			11 0	70				
00	file Form 6198	21		-11,0	70.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-	11,07	70.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope				23a		520.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	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				
е	Total of all amounts reported on line 20 for all properties				23e	11	590.		
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ide any lo	osses			. 24		
25	Losses. Add royalty losses from line 21 and rental real esta-	te loss	es from li	ne 22. E	nter to	otal losses he	re 25	(11,070.
26	Total rental real estate and royalty income or (loss).								<u> </u>
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on . 26		-11,070.

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

2022
Attachment
Sequence No. 52

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

CHANDAN KUMAR REDDY MANNEM

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 632-85-6023

Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.
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 2022. See instructions	⊠ Se	lf-only Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. 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 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	3,650.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, 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	3,650.
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 2022, see the instructions for the amount to enter	6	3,650.
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3,650.
9	Employer contributions made to your HSAs for 2022		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	19.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,631.
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.
David	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		10.4
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	arate I	HSAs, complete
14a	Total distributions you received in 2022 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 8f	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	<i>r.</i>	ions b	
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 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 17d	21	

Form **8995**

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2022

Attachment Sequence No. **55**

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

CHANDAN KUMAR REDDY MANNEM

Your taxpayer identification number 632-85-6023

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)	
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 ()		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	_	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	(see instructions)	6 1.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 1.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 and	1	10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 100,485.		
12 13	Net capital gain (see instructions)	12 28. 13 100,457.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	20,091.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also			20,001.
	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0		17	(0.)

Passive Activity Loss Limitations

See separate instructions.

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

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form8582 for instructions and the latest information.

	OMB No. 1545-1008						
	20 22 Attachment						
	Sequence No. 858						
Identifying number							

CHAN	IDAN KUMAR REDDY MANNEM				632	-85-	-6023	
Par								
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.					
Renta Allow								
1a	Activities with net income (enter the a	mount from Part I\	/, column (a)) .	1a	0.			
b	Activities with net loss (enter the amount from Part IV, column (b))							
С	Prior years' unallowed losses (enter the	ne amount from Pa	art IV, column (c))	1c ()			
d	Combine lines 1a, 1b, and 1c					1d	-11,070.	
All Ot	her Passive Activities							
2a	Activities with net income (enter the a	mount from Part V	'. column (a)) .	2a				
b	Activities with net loss (enter the amount)			
С	Prior years' unallowed losses (enter th)			
d								
3								
	all losses are allowed, including any		ed losses entered	on line 1c or 2c.	Report the			
	losses on the forms and schedules no	ormally used .				3	-11,070.	
	If line 3 is a loss and: • Line 1d is a l	loss, go to Part II.						
		loss (and line 1d is	zero or more), sk	ip Part II and go to	line 10.			
O4:	16				م ملاء مراس ام		da mak aamamlak	
	on: If your filing status is married filing . Instead, go to line 10.	separately and yo	bu lived with your	spouse at any tim	ie during the	year,	do not complete	
	t II Special Allowance for Rer	ntal Real Estate	Activities With	Active Participa	ation			
	Note: Enter all numbers in Par			•				
4	Enter the smaller of the loss on line 1		4	11,070.				
5	Enter \$150,000. If married filing separ	50,000.		•				
6	Enter modified adjusted gross income	24,505.						
	Note: If line 6 is greater than or equal							
	on line 9. Otherwise, go to line 7.							
7	Subtract line 6 from line 5	25,495.						
8	Multiply line 7 by 50% (0.50). Do not en		8	12,748.				
9	Enter the smaller of line 4 or line 8					9	11,070.	
Par								
10	Add the income, if any, on lines 1a an					10	0.	
11	Total losses allowed from all passiv					11	11,070.	
Pari	out how to report the losses on your to Complete This Part Before	e Part I. I ines 1	a. 1b. and 1c. S	ee instructions		11	11,070.	
	Complete time t art Belef						. ,	
	Name of activity	Current year		Prior years	Ove	Overall gain or loss		
	Name of activity	(a) Net income (b) Net loss (line 1a) (line 1b)		(c) Unallowed loss (line 1c) (d) (1	(e) Loss	
25-2	10-291,KESAVULU NAGAR	0.	11,070.				11,070.	

11,070.

0.

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2022)

,									. 490 =	
Part V Complete This Part Before	еР	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			•	
Name of a skirth	Current year			Prior years		Overall gain or loss				
Name of activity		(a) Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
	-									
Total. Enter on Part I, lines 2a, 2b, and 2c Part VI Use This Part if an Amou	2+ le	Shown on F	Oort II	Line 0 S	oo inatru	tiono				
Ose This Part II an Amou	T		art II,	, Line 9. S	ee mstruc	tions.				
Name of activity	ar to	orm or schedule and line number be be reported on see instructions)) Loss	(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
25-10-291,KESAVULU NAGAR	E Ln 22		11,070.		1.00000000		11,070.		0.	
Total				11,070.	1.00)	11,07	0.	0.	
Part VII Allocation of Unallowed L	.oss			IS.						
Name of activity		Form or sche and line nun to be reporte (see instruct	mber ed on (a) Lo		Loss		(b) Ratio (c		(c) Unallowed loss	
Total		· · · · ·					1.00			
Part VIII Allowed Losses. See instr	ucti									
Name of activity		Form or sched and line numb to be reported (see instruction		(a) l	_oss	(b) Unallowed loss		((c) Allowed loss	
Total		<u> </u>	<u></u>							