(Rev. January 2021)

Department of the Treasury

## 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

IIILEIIIAI	nevertue Service					
Submi	ssion Identification Number (SID)					
Taxpaye	pr's name	Social sec	urity numl	per		
SRII	NIVAS PARASA	025-2	21-783	1		
Spouse'	s name	Spouse's	social sec	urity nun	nber	
Part	, , ,	r year you	ı are au	thorizi	ng.)	
	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	ر ا	11	262
1	Adjusted gross income					262.
2 3	Total tax					912.
4	Amount you want refunded to you					<u> 267.</u>
5	Amount you owe				3,	355.
Part				our re	eturr	<u> </u>
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended					
to send for any Agent t payment authori payment business taxes t person	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 rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Loo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the Industry of the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the paint of the payment (settlement) below is my signature for the income tax return (original or amended) I apple to the payment withdrawal Canapate.	ection of the S. Treasury icated in the on to debit to the authouests must processing payment. I	e transming and its of and its of the entry rization. To the elfurther action and the elfurther actions.	ssion, (kindesigna baration to this a forevoluted no ectronications.	b) the ted Find software countries the count	reason nancial vare for nt. This ncel) a than 2 nent of hat the
	nic Funds Withdrawal Consent.	г			_	
-	yer's PIN: check one box only		1 7 8	3 3	1	
×	I authorize GLOBAL TAXES LLC to enter or generate  ERO firm name	•	Enter five		out	as my
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zer	os	
	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 <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your s	ignature ▶ Date ▶ _					
Snous	se's PIN: check one box only	_				
Ороца	I authorize to enter or generate	my DINI				as my
	ERO firm name	-	Enter five	digits. b		as IIIy
	signature on the income tax return (original or amended) I am now authorizing.		don't ente			
	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 <b>and</b> your return is filed using the Practitioner PIN metholow.		_			_
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	Certification and Authentication — Practitioner PIN Method Only					
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.					
	LINAT NA Enter your on digit En in tollowed by your into digit our colloctour int.	Don't	enter all ze	eros		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of I	nitting this r	eturn in a	accorda	inće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				

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

OMB No. 1545-0074

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

Filing Status	<b>X</b> 5	Single Married filing jointly	Marr	ied filing separatel	y (MFS)	Head of	hous	ehold (HOH	)		ifying survi	ving
Check only one box.	If vo	u checked the MFS box, enter th	ne name of	vour spouse. If vo	u check	red the HOH o	r OSS	S box ente	r the c	•	se (QSS)	a gualifying
one box.		on is a child but not your depend		your opouco. If yo	u 0110011			o box, onto	11100	ilia o	riarrio il tric	quamymg
Your first name	and mi	ddle initial	Last n	ame					Yo	our soc	cial security	number
SRINIVAS	3		PAR	ASA					0	025-21-7831		
		first name and middle initial	Last n						Spouse's social security number			
, , , ,									'			•
Home address	(numbe	er and street). If you have a P.O. box,	see instruct	tions.				Apt. no.	Pr	esider	ntial Electio	n Campaign
2808 CAI	DER	AVE NE						6107			ere if you, o	
		ce. If you have a foreign address, als	o complete	spaces below.	Sta	ite	ZIP	code			f filing joint	
REDMOND					W.F	A	98	0050		_	this fund. C w will not a	•
Foreign country	name			Foreign province/state/county Forei					or refund.	9-		
											You	Spouse
Digital	At ar	ny time during 2022, did you: (a)	receive (as	s a reward, award,	or payr	ment for prope	erty o	r services);	or (b)	sell,		
Assets		ange, gift, or otherwise dispose									X Yes	☐ No
Standard	Som	eone can claim: You as a	depender	nt	ouse as	a dependent						
Deduction		Spouse itemizes on a separate re	eturn or yo									
A are /Dlindress		Were born before January	0 1050	Are blind	C	. D Was be	wa ba	fore length	a. O 1	050	الماما	
			2, 1956	<del>_</del>	Spouse			fore Janua	, ,		ls blir	
Dependents				(2) Social secunumber	urity	(3) Relationsh to you	nip			if qualifies for (see instructions):  It   Credit for other dependents		
If more than four	(1) [	rst name Last name		Hambor		to you		Child tax credit		. ,	Credit for othe	ar dependents
dependents,									<u></u>			<u></u>
see instructions	s ——								<u></u>			<u></u>
and check here									<u> </u> 			<u></u>
	1a	Total amount from Form(s) W-2	2 hov 1 (e	ee instructions)		l				1a	73	2,311.
Income	b	( )		,					•	1b	43	<u> </u>
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2								1c		
W-2 here. Also	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							•	1d		
attach Forms W-2G and	e	Taxable dependent care benefits from Form 2441, line 26							•	1e		
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29							•	1f		
was withheld.	g g	Wages from Form 8919, line 6		· ·			•		•	1g		
If you did not get a Form	h	Other earned income (see instr					•		•	1h		0.
W-2, see	i	Nontaxable combat pay election	,			1	iÌ		•			
instructions.	z	Add lines 1a through 1h .								1z	23	2,311.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t			2b		
if required.	За	Qualified dividends	3a	178.		ordinary divide				3b		178.
	4a	IRA distributions	4a		b T	axable amoun	ıt .			4b		
Standard	5a	Pensions and annuities	5a			axable amoun				5b		
Deduction for-	6a	Social security benefits	6a		b T	axable amoun	ıt .			6b		
Single or Married filing	С	If you elect to use the lump-su	m election	method, check he	ere (see	instructions)						
separately, \$12,950	7	Capital gain or (loss). Attach So	chedule D	if required. If not r	equired	, check here				7	_	3,000.
Married filing	8	Other income from Schedule 1	, line 10							8		5,227.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6k	o, 7, and 8							9		4,262.
surviving spouse, \$25,900	10	Adjustments to income from S								10		
Head of	11	Subtract line 10 from line 9. Th	is is your <b>a</b>	adjusted gross in	come					11	21	4,262.
household, \$19,400	12	Standard deduction or itemiz	zed deduc	tions (from Sched	lule A)					12		2,950.
If you checked	13	Qualified business income ded	luction fror	m Form 8995 or Fo	orm 899	5-A				13		
any box under Standard	14	Add lines 12 and 13								14	1	2,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If	zero or les	ss, enter -0 This	is your t	taxable incon	ne			15	20	1,312.

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	44,621.
Credits	17	Amount from Schedule 2, lin	ie 3					17	
	18	Add lines 16 and 17						18	44,621.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	44,621.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	291.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	44,912.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				<b>25a</b> 47	7,977.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c	290.		
	d	Add lines 25a through 25c						25d	48,267.
If	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	48,267.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	ınt you <b>overpaid</b>		34	3,355.
neiulia	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	s is attached, che	ck here	. 🗆	35a	3,355.
Direct deposit?	b	Routing number 0 5 4			c Type:		Savings		
See instructions.	d	Account number 5 3 8	6 4 8 3	8 4 4			Ü		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24							
You Owe	0.	For details on how to pay, g		•				37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retur	n with the IRS?	? See			
Designee	ins	tructions				🗌 <b>Yes.</b> C	omplete b	elow.	<b>⋉</b> No
		signee's		Phone			onal identifi	cation r	
	naı			no.			ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature	pioto: Boolaration	Date	Your occupation	acca on an information			t you an Identity
	10	ur signature		Date	Tour occupation				N, enter it here
Joint return?					SOFTWARE	ENGINEER	(see ii	nst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	oth must sign.	Date	Spouse's occupa	tion			t your spouse an
Keep a copy for your records.							Identi (see ii		ction PIN, enter it here
,		(010)000 100						131.)	
		one no. (919)389–103		Email address	SRINIVAS.PAR	ASA444@GMAIL.C		—	Ob 1: if:
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer									Self-employed
Use Only		m's name GLOBAL TA			- 00055		Phone		
			Y CT E BRU	INSWICK NO			Firm's	; EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form <b>1040</b> (2022)

#### **SCHEDULE 1** (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

Name	ocial s	ecurity number			
SRIN	IVAS PARASA		025-2	21-78	31
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	èΕ.	5	-15,234.	
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			
I	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				
	, , , , , , , , , , , , , , , , , , ,	8m			
	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	8s (	,		
t	Pension or annuity from a nonqualifed deferred compensation plan or		,		
	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
	Other income. List type and amount:				
_	Substitute Payment from 1099-Misc 7.	87	7.		

Total other income. Add lines 8a through 8z . . . . . . . . . . . . . . .

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-15,227.

10

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

Educator expenses   11	Par	Adjustments to Income			
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  3 IFA desclustion  3 IFA desclustion  4 IFA descl	11			11	
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  3 IFA desclustion  3 IFA desclustion  4 IFA descl	12	Certain business expenses of reservists, performing artists, and fee-	basis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 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 24 Jeli 25 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions):  20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions):  IRA deduction	19a			19a	
20   Student loan interest deduction   21   22   23   24   22   24   24   24   24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction  Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.  Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974.  Contributions to section 501(c)(18)(D) pension plans  Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions).  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  Housing deduction from Form 2555.  Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).  Total other adjustments. List type and amount:  25  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount:  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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  c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24				
rental of personal property engaged in for profit			24a		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			24b	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			24d		
f Contributions to section 501(c)(18)(D) pension plans	е		040		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		249		
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	"		24h		
from the IRS for information you provided that helped the IRS detect tax law violations	i	` <i>'</i>	2-711		
tax law violations	٠				
j Housing deduction from Form 2555			24i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		,		
z Other adjustments. List type and amount:	•••		24k		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		24z		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	•			
				26	

# SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

#### **Additional Taxes**

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

2022

Attachment Sequence No. 02

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

Your social security number 025-21-7831

DICE	NIVAD I AKADA	17 /0	J <b>T</b>
Pa	rt I Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Pai	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income.  Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	291.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(co	ontinu	ed on page 2

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

## Part II Other Taxes (continued)

7	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b			
С	Additional tax on HSA distributions. Attach Form 8889	17c			
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	<b>17</b> i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k	_		
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
Z	Any other taxes. List type and amount:				
		17z			
8	Total additional taxes. Add lines 17a through 17z		18		
9	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your <b>total other taxe</b>		04	l	0.01
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21		291.

#### 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

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

Your social security number 025-21-7831 SRINIVAS PARASA 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) lines below. Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) with column (g) 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 . . . . . . . . . . . . . . 750. -608. 1,358. Totals for all transactions reported on Form(s) 8949 with Box B checked 25,248. 25,248. 0. . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with 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 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 . . . . . . . .

#### Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	Proceeds Cost		ts from Part II, n (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 <b>Box D</b> checked	6,824.	11,676.		9.	-4,843.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporate	tions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	Carryover	14	( )		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	15	-4,843.			

7

-608.

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -5,451. • 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. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 21 3,000.) • (\$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.

Department of the Treasury

Internal Revenue Service

### **Sales and Other Dispositions of Capital Assets**

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

Name(s) shown on return SRINIVAS PARASA

Social security number or taxpayer identification number

025-21-7831

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	to you on F	orm 1099-B	·			
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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	04/11/22	12/31/22	750.	1,358.			-608.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	750.	1.358.			-608.

**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.

REV 03/22/23 PRO

Form 8949 (2022) Attachment Sequence No. **12A** Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SRINIVAS PARASA

Social security number or taxpayer identification number 025-21-7831

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on I	Form(s) 1099	-B showing bas	•		•	<b>)</b>
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	See the separate 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	09/21/21	12/31/22	6,824.	11,676.	W	9.	-4,843.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	I here and inc	lude on your					

**Note:** If you checked Box D 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.

above is checked), or line 10 (if Box F above is checked) .

6,824.

11,676.

## 8949

### **Sales and Other Dispositions of Capital Assets**

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. OMB No. 1545-0074 Attachment Sequence No. 12A

Name(s) shown on return

Department of the Treasury

Internal Revenue Service

Social security number or taxpayer identification number

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

025-21-7831 SRINIVAS PARASA Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) 🗵 (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (g). instructions 04/19/22 12/31/22 FIDELITY BROKERAGE SERVICES LLC 25,248. 25,248. 0.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract 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 25,248. 25,248. above is checked), or line 3 (if Box C above is checked) .

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.

## 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.

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

Attachment Sequence No

2022 Attachment Sequence No. 13

OMB No. 1545-0074

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

Your social security number

SRII	NIVAS PARASA					0	25-2	1-7831	
Par									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	<b>C</b> . See	e instru	ctions. If you are	an indi	vidual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(c) 1	0002 9	Soo inc	structions			oc 🛛 No
	f "Yes," did you or will you file required Form(s) 1099?								
				· ·	<u> </u>		• •		, ito
1a	Physical address of each property (street, city, state, ZIF		-						
Α	1-62/1, KAIKALURU RD KORUKOLLU, KALIDIN	NDI K	RISHNA	AND,	HRA	PRADESH IN	5213	343	
В									
С									T
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair				Fa			al Use	QJV
Α.				Α		Days	Da		
A B		if you meet the requirements to file as a				365		0	
C	qualified joint venture. See instru	ıctions		B C					<del>                                     </del>
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land	l	7	Self-Rental			
	Multi-Family Residence 4 Commercial	lai	6 Roya			Other (describe	a)		
	Matti-i armiy riesidence 4 Commercial		O HOye	iiiics					
						Properties	:		
Incor				Α		В			С
3	Rents received	3		7	64.				
_ 4	Royalties received	4							
	nses:	_							
5	Advertising	5							
6 7	Auto and travel (see instructions)	7		2 0	36.				
8	Cleaning and maintenance	8		۷, ٥	130.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1.4	155.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,8	860.				
15	Supplies	15		4,2	217.				
16	Taxes	16							
17	Utilities	17		4,4	130.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		15,9	98.				
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			-15,2	20/				
00		21	-	-15,2	34.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	15,23	2 /1 \	(	١	(	١
222	Total of all amounts reported on line 3 for all rental prope	$\overline{}$			23a		764.	(	
23a b	Total of all amounts reported on line 4 for all regalty properties				23b	<u> </u>			
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	15,9	98.		
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do no</b>						24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		Enter to	otal losses here	25	(	15,234.)
26	Total rental real estate and royalty income or (loss).							•	/
	here. If Parts II, III, IV, and line 40 on page 2 do not								
	Schedule 1 (Form 10/0) line 5 Otherwise include this ar						06		_15 22/

**Investment Interest Expense Deduction** 

Go to www.irs.gov/Form4952 for the latest information.

Attach to your tax return.

OMB No. 1545-0191

2022

Attachment
Sequence No. 51

Identifying number

7

8

REV 03/22/23 PRO

1,204.

Form **4952** (2022)

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

For Paperwork Reduction Act Notice, see page 4.

SRINIVAS PARASA 025-21-7831 Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2022 (see instructions) 1 1,204. 2 2 3 **Total investment interest expense.** Add lines 1 and 2 . . . . . . 3 1,204. Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 178. 4a 4b 178. 4c 0. Net gain from the disposition of property held for investment . . . . . . 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . . . . . . . . . . . . . 4e 4f 0. Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4h 0. 5 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0- . . . . . 6 6 0. Part III **Investment Interest Expense Deduction** Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line

**Investment interest expense deduction.** Enter the **smaller** of line 3 or line 6. See instructions

 $R\Delta\Delta$ 

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

SRINIVAS PARASA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 025-21-7831

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.			
Par	HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.					
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022.  See instructions					
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. <b>Do not</b> 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 <b>every</b> month during 2022, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,650 (\$7,300 for family coverage). <b>All others</b> , 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	3,650.			
12	Subtract line 11 from line 8. If zero or less, enter -0	12	0.			
13	<b>HSA deduction.</b> Enter the <b>smaller</b> 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 II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.						
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	<b>Taxable HSA distributions.</b> 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 <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here					
b	<b>Additional 20% tax</b> (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	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instruction 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.	ons b				
18	Last-month rule	18				
19	Qualified HSA funding distribution	19				
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20				
21	<b>Additional tax.</b> Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21				

REV 03/22/23 PRO

BAA

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

SRINIVAS PARASA

#### **Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. 71

Your social security number 025-21-7831

Part	Additional Medicare Tax on Medicare Wages			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one			
	Form W-2, enter the total of the amounts from box 5	1 232,311.		
2	Unreported tips from Form 4137, line 6	2		
3	Wages from Form 8919, line 6	3		
4	Add lines 1 through 3	4 232,311.		
5	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately \$125,000			
	Single, Head of household, or Qualifying surviving spouse \$200,000	<b>5</b> 200,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0		6	32,311.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). E	inter here and go to		
	Part II		7	291.
Part	Additional Medicare Tax on Self-Employment Income			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you			
	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8		
9	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately \$125,000			
	Single, Head of household, or Qualifying surviving spouse \$200,000	9		
10	<u> </u>	10		
11	,	11		
12	Subtract line 11 from line 8. If zero or less, enter -0		12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.	•		
	go to Part III		13	
Part		Compensation		
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately \$125,000			
	Single, Head of household, or Qualifying surviving spouse \$200,000	15		
16	Subtract line 15 from line 14. If zero or less, enter -0		16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line	16 by 0.9% (0.009).		
	Enter here and go to Part IV		17	
Part	V Total Additional Medicare Tax			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line			
	or 1040-SS filers, see instructions), and go to Part V		18	291.
Part				
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	<b>19</b> 3,659.		
20		20 232,311.		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax			
		<b>21</b> 3,369.		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Addit			
	withholding on Medicare wages		22	290.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation	from Form W-2, box		
	14 (see instructions)		23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include			
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25cd			
	1040-SS filers, see instructions)		24	290.

#### Net Investment Income Tax— Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

2022 Attachment Sequence No. 72

OMB No. 1545-2227

Name(s) shown on your tax return Your social security number or EIN SRINIVAS PARASA 025-21-7831 Part I Investment Income ☐ Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 1 2 2 178. 3 3 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a -15,234.Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) . . . . . . . . . . . . . . . 4b 4c -15,234. Net gain or loss from disposition of property (see instructions) . . . . . 5a 5a -3,000.Net gain or loss from disposition of property that is not subject to net 5b Adjustment from disposition of partnership interest or S corporation stock (see 5d -3,000.6 Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 7 7. 7 Other modifications to investment income (see instructions) . . . . . . . . Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. . . . . 8 -18,049. Part II Investment Expenses Allocable to Investment Income and Modifications State, local, and foreign income tax (see instructions) . . . . . . 9b Miscellaneous investment expenses (see instructions) . . 9c 9d 10 10 Total deductions and modifications. Add lines 9d and 10 . . . . . 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 12 12 0. Individuals: Modified adjusted gross income (see instructions) . . . . . . . . . 13 13 214,262. 14 200,000. 15 Subtract line 14 from line 13. If zero or less, enter -0- . . . . . 15 14,262. 16 16 0. Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 17 0. **Estates and Trusts:** 18a Deductions for distributions of net investment income and deductions under 18b Undistributed net investment income. Subtract line 18b from line 18a (see 18c 19a Highest tax bracket for estates and trusts for the year (see instructions) . . . 19b Subtract line 19b from line 19a. If zero or less, enter -0- . . . . . . . . . . . 19c 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 21

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