## 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

	1				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
SAIR	CRISHNA VATTIKONDA	802-62	-215	7	
Spouse's	s name	Spouse's soo			er
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	Voor vou o	ro ou	thorizino	. \
	whole dollars only on lines 1 through 5.	year you a	re au	unonzing	J. <i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	6-	1,303.
2	Total tax		2		5,260.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,729.
4	Amount you want refunded to you		4		
=	Amount you owe		5	4	2,469.
Part		een a con		our reti	ırn)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
return (control to send for any Agent to paymer authorize paymer business taxes to personal	wledge 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 return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction in the financial institution account indiction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisits days prior to the payment (settlement) date. I also authorize the financial institutions involved in the particle receive confidential information necessary to answer inquiries and resolve issues related to the pain in full force and effect until I notify the U.S. Treasury Financial institutions involved in the particle receive confidential information necessary to answer inquiries and resolve issues related to the pain identification number (PIN) below is my signature for the income tax return (original or amended) I and Funds Withdrawal Consent.	tter, or electroction of the ti S. Treasury a cated in the ti- n to debit the the authorizatests must be processing of ayment. I fur	onic refansmis and its cax prepare entry ation. The receiff the elaboration at the receiff the acceiments.	turn originassion, (b) to designated paration so to this according to the total paration between the total paration in the total paration paration posterionic per tronic per tr	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the
					l
	yer's PIN: check one box only	2	2   3	1   5   7	
X	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	ř En		digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Your s	gnature ► Date ►				
Snous	e's PIN: check one box only				
	I authorize to enter or generate	my PINI			as my
	ERO firm name	_	ter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 6		8 9
		Don't ent	er all Ze	#10S	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged to file for 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 Ir	itting this retu	ırn in a	accordanc	
FRO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

E 1040 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.

one box. If you checked the MRS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:  Vour first name and middle initial  Last name  VATTIKONDA  ### APA no.  Box 2-62-2157  ### Spouse's social security number  ### APA no.  ### APA no.  ### Presidential Election Campaign  Check here if you, or your social security number  ### APA no.  ### APA no.  ### Presidential Election Campaign  Check here if you, or your social security number  ### APA no.  #	Filing Status Check only	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	house	ehold (HOF	l)		ifying surv ıse (QSS)	iving
SAIKRISHNA   Last rame   Sopuse's siral name and middle initial   Last rame   Sopuse's social security number   Sopuse   State   ZIP code   Social social principle   Social social principle   Sopuse   State   ZIP code   Social social principle   Sopuse   State   ZIP code   Sopuse   Social social principle   Sopuse   State   ZIP code   Sopuse   Social social principle   Sopuse   State   ZIP code   Sopuse   State   ZIP code   Sopuse   Social social   Social social   ZIP code   Sopuse   State   ZIP code   Sopuse   State   ZIP code   Sopuse   State   ZIP code   Sopuse   Social social   ZIP code   Sopuse   Social social   ZIP code   ZIP code   Sopuse   Social social   ZIP code   ZIP cod	one box.				our spouse. If you	ı check	ed the HOH or	r QSS	box, ente	r the c	hild's	name if the	e qualifying
If joint return, spouse's first name and middle initial   Last name   Last n	Your first name	and mi	ddle initial	Last na	me					Yo	ur so	cial security	y number
April   Total amount from Form(s)   W-2, box   Sate   Sat	SAIKRISH	INA		VATT	'IKONDA					8	02-6	52-2157	7
City, town, or post office. If you have a foreign address, also complete spaces below.   State   ZIP code   TX   78.758   Store   TX   TX   78.758   Store   TX   78.758   Store   TX   TX   TX   TX   TX   TX   TX   T	If joint return, s	pouse's	first name and middle initial	Last na	me					Sp	ouse's	s social sec	urity number
At any time during 2022, did you; (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a cligital asset for a financial interest in a digital asset)? (See instructions)    At any time during 2022, did you; (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a cligital asset for a financial interest in a digital asset)? (See instructions)    Standard   Company	Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	- 1			
AUSTIN   Standard Same   Autor													
Foreign country name	City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete spaces below. State ZIP									
Spouse   Income   Attach Form(s)   W-2 pero Also and Earth Earth Form(s)   W-2 pero Also and Earth E				TX 78									change
Assets Standard Deduction Spouse itemizes on a separate return or you were ad ual-status alien  Age/Blindness You:   Were born before January 2, 1958   Are blind Dependents (see instructions):   (1) First name   Last name   Spouse:   Was born before January 2, 1958   Is blind  Dependents (see instructions):   (2) Social security   (3) Relationship   to you   Child tax credit   Credit for other dependents   Total amount from Form(s) W-2, box 1 (see instructions)   1	Foreign country	/ name			Foreign province/sta	te/count	у	Fore	gn postal co	de yo	ur tax		Spouse
Standard Deduction	Digital												
Spouse itemizes on a separate return or you were a dual-status alien	-							asse	i)? (See ins	struction	ons.)	∐ Yes	No No
Dependents (see instructions):  (if more than four dependents):  (if more than four dependents depe	Standard Deduction			•	-		a dependent						
If more than four dependents, see instructions and check here	Age/Blindness	You:	Were born before January 2, 1	1958 [	Are blind	Spouse	: Was bo	rn bet	ore Janua	ry 2, 1	958	☐ Is bli	nd
If more than four dependents, see instructions and check here	Dependents	s (see	nstructions):			rity		nip (	4) Check th	e box it	qualif	ies for (see i	instructions):
dependents, see instructions and check here	If more	<b>(1)</b> Fi	rst name Last name		number		to you		Child ta	x credi	t	Credit for oth	er dependents
see instructions and check here	than four												
Income  Income  Income  Income  Attach Form(s) W-2 here. Also Household employee wages not reported on Form(s) W-2 Tip income not reported on line 1a (see instructions)  Income of treported on line 1a (see instructions)  Income on treported on line 1a (see inst		s ——											
Income  1a Total amount from Form(s) W-2, box 1 (see instructions)  1b Household employee wages not reported on Form(s) W-2  1c Tip income not reported on line 1a (see instructions)  1c Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  1d Medicaid waiver payments not reported on Form 8899, line 29  1f Dural Reported on	and check	,								<u></u>			ᆜ
b Household employee wages not reported on Form(s) W-2  Attach Form(s) W-2 here, Also attach Forms W-2 here, Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions  If Wages from Form 8919, line 6  Wages from Form 8919, line 6  Other earned income (see instructions)  In the combat pay election (see instructions)  Add lines 1 a through 1 h  Attach Sch. B a lark distributions  If required.  Attach Sch. B a lark distributions  Add lines 1 a through 1 h  Attach In the combat pay election (see instructions)  Attach Sch. B a lark distributions  Add lines 1 a through 1 h  Attach Sch. B a lark distributions  Add	nere	J										<u> </u>	
Attach Forms W-2 here. Also attach Forms W-2 gand 1099-Ri ft ax was withheld.  If you did not get a Form W-2, see instructions.  Z Add lines 1a through 1h  Attach Sch. B 2a Tax-exempt interest . 2a b Taxable interest . 2a b Taxable interest . 2a b Taxable interest . 2b . 2. if required.  Attach Sch. B 3a Qualified dividends . 3a 1 b Ordinary dividends . 3b 1.  If you decid find geparately. Str. Single or Married filling separately. Str. Single or Marr	Income			,	,							7	2,550.
W-2 here. Also attach Forms  W-2 and 1099-Rif tax was withheld. If you did not get a Form W-2, see instructions  If you did not get a Form W-2, see instructions  V-2, See instructions.  Attach Sch. B  Attach Sch. B  If required.  Attach Sch. B  If required.  Attach Sch. B  If you did not get a Form W-2, see instructions  In the very s	Attach Form(s)												
W-2G and 1099-R if tax was withheld. If you did not get a Form W242 and lines 1 a through 1 h	W-2 here. Also										_		
1099-R if tax was withheld.  f Employer-provided adoption benefits from Form 8839, line 29  11f   Wages from Form 8919, line 6   1g   1g   1g   1g   1g   1g   1g	attach Forms												
Wages from Form 8919, line 6	1099-R if tax		·		•			•			_		
See instructions   See instruc	was withheld.							•			_		
W-2, see instructions.  I Nontaxable combat pay election (see instructions)	If you did not							•					
Add lines 1a through 1h  Attach Sch. B  Attach Sch.	W-2, see		,	,				. i			111		<u> </u>
Attach Sch. B if required.  3a Qualified dividends 3a 1. b Ordinary dividends 3b 1.  4a IRA distributions 4a b Taxable amount 4b  Standard Deduction for—Single or Married filing separately, \$12,950	instructions.			(266 111211	uctions)		!!				17	7	2 550
If required.  3a Qualified dividends 3a	Attach Sch. B			22		 h Т	 avahla intaras	+			_		
4a IRA distributions . 4a b Taxable amount . 4b  Standard Deduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, \$19,400  If you checked any box under Standard Deduction, \$10,000  Ad IRA distributions . 4a b Taxable amount . 5b  B Taxable amount . 5b  B Taxable amount . 6b  Taxable amount . 6b  Taxable amount . 5b  Taxable amount . 5c  Taxable	if required.				1.						_		
Standard beduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying Surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, \$200 check and any box under Standard Deduction, \$200 check and box and any size and any box under Standard Deduction, \$200 check and box and any size and any box under Standard Deduction, \$200 check and box and any size and					-								
Comparison of	Standard												
Single or Married filing separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of Household, \$11 Subtract line 10 from line 9. This is your adjusted gross income  12 Standard deduction or itemized deductions (from Schedule A)  13 Qualified business income deduction from Form 8995 or Form 8995-A  15 Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income  16 If you elect to use the lump-sum election method, check here (see instructions)  7 -3,000.  7 -3,000.  8 -8,250.  9 61,303.  9 61,303.  10 Subtract line 10 from line 9. This is your total income  10 Subtract line 10 from line 9. This is your adjusted gross income  11 61,303.  12 12,950.	Deduction for—		<del>-</del>								_		
separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Deduction, Deduction, Deduction, Deduction, 15  Subtract line 10 from line 11 If zero or less enter -0- This is your taxable income  7	Single or Married filing		_		method, check he					. 🖂			
Married filing jointly or Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 61,303.  May a surviving spouse, \$25,900 10 Adjustments to income from Schedule 1, line 26 10 Subtract line 10 from line 9. This is your adjusted gross income 11 61,303.  May a surviving spouse, \$25,900 10 Adjustments to income from Schedule 1, line 26 10 10 10 10 10 10 10 10 10 10 10 10 10	separately,	7	Capital gain or (loss). Attach Sche	edule D if	required. If not re	equired,	check here			. 🗆	7	7 -	3,000.
jointly or Qualifying Surviving spouse, \$25,900 Head of household, \$19,400 If you checked any box under Standard Deduction, Deduction, Deduction, Deduction, Deduction, Deduction, Subtract line 14 from line 11 If zero or less enter -0- This is your total income	Married filing	8	Other income from Schedule 1, lir	ne 10							8		
surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Peduct		9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your <b>total</b>	income					9		
Head of household, \$19,400   12   Standard deduction or itemized deductions (from Schedule A)	surviving spouse,	10	Adjustments to income from Sche	edule 1, l	ine 26						10		
Standard deduction or itemized deductions (from Schedule A)   12   12,950	Head of	11	Subtract line 10 from line 9. This i	s your <b>a</b> c	djusted gross ind	ome					11	6	1,303.
If you checked any box under Standard Deduction, Deduction, Description, Descriptio		12	Standard deduction or itemized	deduct	ions (from Sched	ule A)					12		
Standard         14         Add lines 12 and 13         1.         14         12,950           Deduction,         15         Subtract line 14 from line 11. If zero or less enter -0. This is your taxable income         15         48,353	If you checked	13	Qualified business income deduct	tion from	Form 8995 or Fo	rm 899	5-A				13		
	Standard	14	Add lines 12 and 13								14	1	2,950.
		15	Subtract line 14 from line 11. If ze	ro or les	s, enter -0 This i	s your <b>t</b>	axable incom	ne			15	4	8,353.

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	6,260.
Credits	17	Amount from Schedule 2, line 3					[	17	
	18	Add lines 16 and 17					[	18	6,260.
	19	Child tax credit or credit for other dependent	s from Schedi	ule 8812			[	19	
	20	Amount from Schedule 3, line 8					[	20	
	21	Add lines 19 and 20					[	21	
	22	Subtract line 21 from line 18. If zero or less, e	enter -0				[	22	6,260.
	23	Other taxes, including self-employment tax, f					Г	23	0.
	24	Add lines 22 and 23. This is your total tax					[	24	6,260.
Payments	25	Federal income tax withheld from:							
,	а	Form(s) W-2			25a	8,	729.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	8,729.
	26	2022 estimated tax payments and amount ap					[	26	
If you have a qualifying child,	27	Earned income credit (EIC)		No .	27		Ī		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812			28				
	29	American opportunity credit from Form 8863.	, line 8		29				
	30	Reserved for future use			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	undable	credits		32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				[	33	8,729.
Refund	34	If line 33 is more than line 24, subtract line 24	from line 33.	This is the amou	nt you <b>o</b> v	erpaid		34	2,469.
neiuliu	35a	Amount of line 34 you want refunded to you	. If Form 8888	s is attached, che	ck here		. 🗆 [	35a	2,469.
Direct deposit?	b	Routing number 0 3 1 1 7 6 1	1 0	c Type: 🛛	Checkir	ng 🗌 Sa	vings		
See instructions.	d	Account number 3 6 1 1 7 7 3	5 0 7 6			Ĭ			
	36	Amount of line 34 you want applied to your 2	2023 estimate	ed tax	36	-	- 1		
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amo</b> For details on how to pay, go to www.irs.gov.	•					37	
	38	Estimated tax penalty (see instructions) .			38		İ		
Third Party Designee		you want to allow another person to discitructions	uss this retur	n with the IRS?	_	Yes. Com	nplete be	elow.	X No
	De	signee's	Phone				al identific		
	na	ne	no.			number	r (PIN)		
Sign Here		der penalties of perjury, I declare that I have examined ief, they are true, correct, and complete. Declaration o							
11010	Yo	ur signature	Date	Your occupation					t you an Identity
1				   SOFTWARE I	ייייייייייייי	משמו	(see in		N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat		PER			t your spouse an
Keep a copy for your records.	Op	odeo o organizaro. Il a joint rotain, <b>boar</b> maet orgin	Bato	орошоо о ооошраг	.011			y Prote	ection PIN, enter it here
	Ph	one no. (512)865-1673	Email address	VATTIKONDA	SK@GM	AIL.COM	-		
	Pre	parer's name Preparer's signature	ure		Date		PTIN	$\Box$	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA 1	RAM SAGAR	GUPTA TALLAM	02/21	./2023 P	02082	703	Self-employed
Preparer		n's name GLOBAL TAXES LLC			, , , , ,	<u>-   -</u>			678)965-9522
Use Only		n's address 245 ROONEY CT E BRUI	NSWICK N	J 08816			Firm's		84-3171965
									4040

# 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

SAIKRISHNA VATTIKONDA

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

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

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

	Sequence No. <b>U</b>
Your soc	ial security number
202-62	_2157

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	ch Schedule E .	5	-8,250.
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		8c		
d		8d ( )		
е	<u> </u>	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h		8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	· • • • • • • • • • • • • • • • • • • •	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		
n		8n		
0	· · · · · · · · · · · · · · · · · · ·	80		
р		8p		
q		8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form	- /		
	· · · · · · · · · · · · · · · · · · ·	8s ( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z	Other income. List type and amount:			
•		8z		
9	Total other income. Add lines 8a through 8z		9	0.050
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NK, line 8	10	-8,250.

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-					
	officials. Attach Form 2106		 	12		
13	Health savings account deduction. Attach Form 8889		 	13		
14	Moving expenses for members of the Armed Forces. Attach Form 3903		 	14		
15	Deductible part of self-employment tax. Attach Schedule SE			15		
16	Self-employed SEP, SIMPLE, and qualified plans			16		
17	Self-employed health insurance deduction			17		
18	Penalty on early withdrawal of savings			18		
19a	Alimony paid			19a		
b	Recipient's SSN				ı	
С	Date of original divorce or separation agreement (see instructions):				1	
20	IRA deduction			20		
21	Student loan interest deduction			21		_
22	Reserved for future use			22		
23	Archer MSA deduction		 	23		
24	Other adjustments:				1	
а	,	24a		-	ı	
b	Deductible expenses related to income reported on line 8l from the				1	
	, , , , , , , , , , , , , , , , , , , ,	24b		-	1	
С	Nontaxable amount of the value of Olympic and Paralympic medals				1	
	and USOC prize money reported on line 8m	24c		-	1	
d	·	24d		-	1	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			ı	
f	Contributions to section 501(c)(18)(D) pension plans	24f			ı	
g	Contributions by certain chaplains to section 403(b) plans	24g			1	
_	Attorney fees and court costs for actions involving certain unlawful				1	
	discrimination claims (see instructions)	24h			1	
i	Attorney fees and court costs you paid in connection with an award				1	
	from the IRS for information you provided that helped the IRS detect				ı	
	tax law violations	24i			1	
j	Housing deduction from Form 2555	24j			ı	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				1	
	,	24k			1	
Z	Other adjustments. List type and amount:				1	
		24z			1	
25	Total other adjustments. Add lines 24a through 24z			25		
26	Add lines 11 through 23 and 25. These are your adjustments to income				ı	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		 	26		

### 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.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Department of the Treasury
Internal Revenue Service

Use Fo

Name(s) shown on return
SAIKRISHNA VATTIKONDA
Your social security number
802-62-2157

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

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 (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 -2,404. Box A checked . . . . . . . . . . . . . . 4,973. 7,377. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 5,417. 5,446. -29. 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 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 . . . . . . . . . 7 -2,433.

### 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 e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	(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	7.	12.			-5.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	332.	1,949.			-1,617.
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 corporat				12	
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	14	( )			
15	Net long-term capital gain or (loss). Combine lines 8a on the back	15	-1,622.			

Schedule D (Form 1040) 2022 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -4,055.• 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 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.

# Form **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

2022

Attachment
Sequence No. 12A

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

Part I

Social security number or taxpayer identification number

802-62-2157

SAIKRISHNA VATTIKONDA

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 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 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 (a) Code(s) from Amount of adjustment instructions. with column (a). instructions Robinhood Securities LLC | 04/18/22 | 12/31/22 4,973. 7,377. -2,404. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

**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.

4,973.

-2,404.

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) .

7,377.

Form 8949 (2022) Attachment Sequence No. 12A

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

Social security number or taxpayer identification number 802-62-2157

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>X (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li></ul>	•	. ,	•	•		•	9)
(F) Long-term transactions	not reported	to you on Fo	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) a (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).
Robinhood Securities LLC	09/11/21	12/31/22	7.	12.			-5.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	7.	12.			-5.

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) .

# Form **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

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

802-62-2157

SAIKRISHNA VATTIKONDA

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 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 (a). instructions ROBINHOOD CRYPTO LLC 05/09/22 12/31/22 5,417. 5,446. -29.2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

**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.

5,417.

-29.

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) .

5,446.

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 SAIKRISHNA VATTIKONDA

Social security number or taxpayer identification number 802-62-2157

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.

(D)	Long-t	erm	transactions	reported on	Form(s)	1099-E	B sh	owing	basis	was re	eported	to th	ne IR	S (see	Note	above)
					- ()											

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

	(F)	Long-term	transactions	not re	ported t	to you	on Form	1099-B
--	-----	-----------	--------------	--------	----------	--------	---------	--------

(F) Long-term transactions	not reported	to you on FC	JIII 1099-D				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate 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).
ROBINHOOD CRYPTO LLC	09/11/22	12/31/22	332.	1,949.			-1,617.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	332.	1,949.			-1,617.

**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.

### **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.

Your social security number

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

OMB No. 1545-0074

SAIR	RISHNA VATTIKONDA					8	302-62	2-2157	,
Part									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	<b>C</b> . See	e instru	ctions. If you are	an indivi	idual, rep	ort farm
A 1	rental income or loss from <b>Form 4835</b> on page 2, line 40.	ett -		0000	2 !				- <b>V</b> IN-
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							Y6	es U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	FLAT NO.301, GVR TOWERS ZP CENTER, KHAMM	MAI	ΓELANGΑ	NA I	N 50	7001			
В									
С									
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental I	Persona	al Use	QJV
	(from list below) above, report the number of fair					Days	Day	/S	QUV
Α	personal use days. Check the Quif you meet the requirements to f			Α		365		0	
В	qualified joint venture. See instru			В					
С				С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	e)		
						Properties	;;		
Incon	ne:			Α		. В			С
3	Rents received	3		5	80.				
4	Royalties received	4							
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,1	.50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		9	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			30.				
15	Supplies	15		2,2	00.				
16	Taxes	16							
17	Utilities	17		2,5	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,8	30.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must file Form 6198	21		-8,2	50				
22	Deductible rental real estate loss after limitation, if any,	21		0,2	.50.				
22	on <b>Form 8582</b> (see instructions)	22	(	8,25	50 )	(	)(		)
23a	Total of all amounts reported on line 3 for all rental prope		Į(	0,23	23a	1	580.		)
b	Total of all amounts reported on line 4 for all royalty prope				23b		300.		
C	Total of all amounts reported on line 4 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	Я :	830.		
24	Total of all amounts reported on line 20 for all properties						24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		· · · Enter to	otal losses here	25 (		8,250.)
26	Total rental real estate and royalty income or (loss).						(		0,200.
20	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		_0 250

**Health Savings Accounts (HSAs)** 

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

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

SAIKRISHNA VATTIKONDA

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

Sequence No. **52** Social security number of HSA beneficiary.

If both spouses have HSAs, see instructions.

802-62-2157

ветоі	<b>re you begin:</b> Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	r 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	elf-only
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	400.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,250.
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	<b>II HSA Distributions.</b> If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	arate	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	<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>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 instruct 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.		
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	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	