1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple in this space.	
Filing Status Check only one box.	lf yo	Single X Married filing jointly U checked the MFS box, enter the nation is a child but not your dependent	ame of y	-	separately (N use. If you ch					spou	lifying surviving ıse (QSS) name if the qualifyir	ng
Your first name	and mi	ddle initial	Last na	ime						Your social security number		
SUJITH			GORI	-						123-4	45-8137	
lf joint return, sp	oouse's	first name and middle initial	Last na	ime						Spouse'	s social security numb	e
PRIYANKA			GORI	_						123-4	45-6899	
Home address ((numbe	er and street). If you have a P.O. box, see	instructi	ons.				A	Apt. no.	Preside	ntial Election Campai	gr
		ce. If you have a foreign address, also co				Sta		ZIP c	ode In postal code	Check here if you, or you spouse if filing jointly, wa to go to this fund. Checki box below will not change		
Foreign country	name			Foreign pr	ovince/state/c	Jouri	ıy	Foreig	jii postal coue	your tax	or refund.	ise
Digital Assets	exch	ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a	a digital	asset (or	a financial i	nter	est in a digital				Yes X No	_
Standard Deduction		eone can claim: U You as a de Spouse itemizes on a separate retur	•		•		a dependent					
		Were born before January 2, 1	958	Are bl	ind Spo	use	: 📋 Was bo	_	ore January 2		Is blind	
Dependents				(2) S	Social security		(3) Relationsh	iip (4		· · · ·	ies for (see instruction	
If more	(1) F	irst name Last name			number	_	to you		Child tax cr	edit	Credit for other depende	nt
than four dependents,												
see instructions	s ——											
and check here												
	4.											
Income	1a ⊾	Total amount from Form(s) W-2, b						• •		. <u>1a</u>	,	•
Attach Form(s)	b	Household employee wages not re Tip income not reported on line 1a	•					• •		. <u>1b</u> . 1c		_
W-2 here. Also	c d							• •		1d		
attach Forms W-2G and	d	Medicaid waiver payments not rep Taxable dependent care benefits f				ISUL		• •		. 1e		-
1099-R if tax	e f	Employer-provided adoption bene				•			. 1f	-		
was withheld.		Wages from Form 8919, line 6 .				•		• •		. 1g		
lf you did not get a Form	g h	Other earned income (see instruct			• • • •	•		• •		. <u>1</u> h	-	-
W-2, see		Nontaxable combat pay election (see						· ·			0	÷
instructions.	z	Add lines 1a through 1h								. 1z	224,136	
Attach Sch. B	2a	-	2a		1		axable interes	· ·		Oh		÷
if required.	2a 3a		3a				Ordinary divide					
	4a		4a				axable amoun					
Standard	5a		5a				axable amoun			. 5b		
Deduction for-	6a		6a				axable amoun			. 6b		-
 Single or Married filing 	c	If you elect to use the lump-sum e		method.					[7		
separately,	7	Capital gain or (loss). Attach Sche		,			,			7		
\$12,950Married filing	8	Other income from Schedule 1, lin								. 8	-14,984	_
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9	209,152	
surviving spouse,	10	Adjustments to income from Sche								. 10		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								. 11	209,152	
household, \$19,400	12	Standard deduction or itemized								. 12		
If you checked	13	Qualified business income deduct					5-A			. 13		
any box under Standard	14									. 14	25,900	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	ro or les	s, enter -	-0 This is y	our	taxable incon	ne.		. 15		
		.										

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 . .	16	31,651.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	31,651.
	19	Child tax credit or credit for other dependents from Schedule 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, enter -0	22	31,651.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	31,651.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	с	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	41,327.
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
qualifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	410.
	33	Add lines 25d, 26, and 32. These are your total payments	33	41,737.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	10,086.
norana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	10,086.
Direct deposit?	b	Routing number X		
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee	ins	tructions		X No
	De nai	signee's Phone Personal identifi ne no. Pursonal identifi	cation	
0:		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the bee	t of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo	ur signature Date Your occupation If the	IRS ser	nt you an Identity
		Prote	ction Pl	N, enter it here
Joint return?		SOFTWARE ENGINEER (see i	,	
See instructions. Keep a copy for	Sp			nt your spouse an action PIN, enter it here
your records.		SOFTWARE ENGINNER (see i		
	Ph	Dine no.		
		parer's name Preparer's signature Date PTIN		Check if:
Paid		PRIYA RAM SAGAR CUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/31/2023 P02082	202	Self-employed
Preparer				678)965-9522
Use Only			s EIN	
Co to warning in -				88-2145487 Form 1040 (2022)
GO IO WWW.IIS.go	uv/r=orn	a1040 for instructions and the latest information. BAA REV 01/24/23 PRO		rom 1040 (2022)

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

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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 20 2

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SUJITH & PRIYANKA GORI 123-45-8137

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			5	-14,984.
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	8 f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8 i	~		
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				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
ο	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		<i>,</i> , , , , , , , , , , , , , , , , , ,		
	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			
z	Other income. List type and amount:				
		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1	040-NR, line 8	10	-14,984.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

II Adjustments to Income			
Educator expenses		11	
Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106	-basis government	12	
Health savings account deduction. Attach Form 8889		13	
		14	
Deductible part of self-employment tax. Attach Schedule SE		15	
Self-employed SEP, SIMPLE, and qualified plans		16	
Self-employed health insurance deduction		17	
Penalty on early withdrawal of savings		18	
Alimony paid		19a	
Recipient's SSN	·		
Date of original divorce or separation agreement (see instructions):			
IRA deduction		20	×
		22	
		23	
Other adjustments:			
	24a	_	
	24b		
Nontaxable amount of the value of Olympic and Paralympic medals			
and USOC prize money reported on line 8m	24c		
Reforestation amortization and expenses	24d		
Repayment of supplemental unemployment benefits under the Trade			
Act of 1974	24e		
	24f		
Contributions by certain chaplains to section 403(b) plans	24g		
Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
Attorney fees and court costs you paid in connection with an award			
from the IRS for information you provided that helped the IRS detect	04:		
		-	
	24j	-	
	a 41		
	244		
	24k		
Other adjustments. List type and amount:			
Other adjustments. List type and amount:	24k 24z	25	
Other adjustments. List type and amount:	24z	25	
Other adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z	24z 		
Other adjustments. List type and amount:	24z 	26	lle 1 (Form 1040) 2022
	Educator expenses Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106 Health savings account deduction. Attach Form 8889 Moving expenses for members of the Armed Forces. Attach Form 3903 Deductible part of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction Penalty on early withdrawal of savings Alimony paid Alimony paid 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 81 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 81 mm the 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 instr	Educator expenses Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 Health savings account deduction. Attach Form 8889 Health savings account deduction. Attach Form 8889 Hoving expenses for members of the Armed Forces. Attach Form 3903 Deductible part of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction Penalty on early withdrawal of savings Attach Schedule SE Alimony paid Self-employed health insurance deduction Penalty on early withdrawal of savings Attach Schedule SE Alimony paid Self-employed for future use Accord of original divorce or separation agreement (see instructions): IRA deduction IRA deduction Student loan interest deduction Reserved for future use Student loan interest deduction Archer MSA deduction Student loan interest deductions) Deductible expenses related to income reported on line 8 from the rental of personal property engaged in for profit Student loan mortization and expenses Reforestation amortization and expenses Studer the Trade Act of 1974 Student loan interest deduction 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) Student loan unawful	Educator expenses 11 Certain business expenses of reservists, performing artists, and fee-basis government 12 Moving expenses for members of the Armed Forces. Attach Form 3903 13 Deductible part of self-employment tax. Attach Schedule SE 15 Self-employed health insurance deduction 16 Self-employed health insurance deduction 17 Penalty on early withdrawal of savings 18 Alimony paid 19a Recipient's SSN 20 Date of original divorce or separation agreement (see instructions): 21 IRA deduction 21 Student loan interest deduction 21 Archer MSA deduction 22 Other adjustments: 23 Ury duty pay (see instructions) 24a Deductible expenses related to income reported on line 8l from the rade Act of 1974 24b Contributions to section 501(c)(18)(D) pension plans 24d Contributions by certain chaplains to section 403(b) plans 24g 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 24g Attorney fees and court costs you paid in connection with an award from the IRS for information you prov

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074 20

2

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

	Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest i		Attachment Sequence No. 03		
	(s) shown on Form 1040, 1040-SR, or 1040-NR				ecurity number
	TH & PRIYANKA GORI		123-4	15-8	137
				4	
1 2	Foreign tax credit. Attach Form 1116 if required		···	1	
2	Form 2441			2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880		1	4	
5	Residential energy credits. Attach Form 5695			5	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	a			
b	Credit for prior year minimum tax. Attach Form 8801	b			
с	Adoption credit. Attach Form 8839	c			
d	Credit for the elderly or disabled. Attach Schedule R 6	d			
е	Alternative motor vehicle credit. Attach Form 8910 6	e			
f	Qualified plug-in motor vehicle credit. Attach Form 8936	of			
g	Mortgage interest credit. Attach Form 8396 6	g			
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6	h			
i	Qualified electric vehicle credit. Attach Form 8834	3i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911)j			
k	Credit to holders of tax credit bonds. Attach Form 8912	k			
I.	Amount on Form 8978, line 14. See instructions	61			
z	Other nonrefundable credits. List type and amount:				
	6	z			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-S	R, or 104	0-NR,		
	line 20		••[8	
For Pa	perwork Reduction Act Notice, see your tax return instructions.	REV 01/24/23			ued on page 2) Ile 3 (Form 1040) 2022
10114	perwork Reduction Act Notice, see your tax return instructions. BAA	KEV 01/24/23		oneut	iie 0 (i 0iiii 1040) 2022

Schedule 3 (Form 1040) 2022

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962	9		
10	Amount paid with request for extension to file (see instructions)	10		
11	Excess social security and tier 1 RRTA tax withheld	11	4	10.
12	Credit for federal tax on fuels. Attach Form 4136	12		
13	Other payments or refundable credits:			
а	Form 2439			
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021			
c d	Reserved for future use 13c Credit for repayment of amounts included in income from earlier years 13d			
е	Reserved for future use			
f	Deferred amount of net 965 tax liability (see instructions) 13f			
g h	Reserved for future use13gCredit for qualified sick and family leave wages paid in 2022from Schedule(s) H for leave taken after March 31, 2021, andbefore October 1, 202113h			
Z	Other payments or refundable credits. List type and amount: 13z			
14	Total other payments or refundable credits. Add lines 13a through 13z	14		
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15	4	10.
	BAA REV 01/24/23 PRO	Schedu	ıle 3 (Form 104	0) 2022

SCHE (Form	DULE E 1040)	Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							OMB No. 1545-0074			
	ent of the Treasury Revenue Service			ach to Form 1040, gov/ScheduleE for					formation.		Attachm Sequend	nent ce No. 13
Name(s)	shown on return								١	our soci	al security	number
	TH & PRIYA									123-4	5-8137	
Part	Note: If yo	ou are in th	s From Rental ne business of renti s from Form 4835	Real Estate an ng personal proper on page 2. line 40.	id Ro rty, use	yalties Schedule	c . See	instruc	ctions. If you are	e an indiv	vidual, rep	ort farm
	id you make an	y payme	nts in 2022 that v	vould require you prm(s) 1099?		· · ·						
1 a				et, city, state, ZIF								
Α	IN											
В												
С												
1b	Type of Prope (from list below		above, report th	real estate prope ne number of fair	rental	and		Fa	ir Rental Days	Person Da		QJV
Α	3			ays. Check the Querts to f			Α		365		0	
B				enture. See instru			В					
<u> </u>			. ,				С					
	of Property: Single Family R	aaidanaa	2 Vacation	/Short-Term Ren	tol	5 Land		7	Self-Rental			
	Multi-Family Re		4 Commer		la	6 Roya			Other (describ	be)		
									Propertie	s:		
Incom	e:						Α		В			С
3	Rents received	1			3		8	00.	*			
4		ved			4	K						
Expen												
5	•				5							
6			structions)		6			10				
7	-		nce		-		2,7	49.				
8 9					8 9							
9 10			sional fees		10							
11	-				11		2,3	60				
12	•		to banks, etc. (se		12	r	4,5	00.				
13	Other interest				13							
14	Repairs				14		3,8	46.				
15	Supplies				15		3,5	69.				
16	Taxes				16							
17					17		3,2	60.				
18		-	or depletion		18							
19	Other (list)				19		1	0.4				
20			nes 5 through 19		20		15,7	84.				
21			ne 3 (rents) and/o structions to find									
	file Form 6198				21	-	-14,9	84.				
22			estate loss after l tructions)		22		14,98		1)	()
23a				or all rental prope				23a	•	800.	\)
b				or all royalty prop				23b				
с			ported on line 12					23c				
d	Total of all amo	ounts rep	ported on line 18	for all properties				23d				
е			ported on line 20					23e	15,	784.		
24				on line 21. Do no						24	1	
25				nd rental real estat							(14,984.)
26				come or (loss).								
				page 2 do not se, include this ar						26	-	-14,984.
For Pa			-	arate instructions.		NF		10 +1	-14,984.			orm 1040) 2022

Schedule E (Form 1040) 2022

Form **88889** Department of the Treasury Internal Revenue Service

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

Health Savings Accounts (HSAs)

OMB No. 1545-0074

2

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

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

Attachment Sequence No. 52 Social security number of HSA beneficiary. If both spouses have HSAs, see instructions

20

SUJ	ITH GORI 123-4		37
Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts,	if requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If and both you and your spouse each have separate HSAs, complete a separate Part I fo		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions	Se	elf-only 🗵 Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	7,300.
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	7,300.
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	1,296.
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	
8	Add lines 6 and 7	8	1,296.
9	Employer contributions made to your HSAs for 2022		
10	Qualified HSA funding distributions 10		
11	Add lines 9 and 10	11	1,296.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	0.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	II HSA Distributions. If you are filing jointly and both you and your spouse each have sep a 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	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part			
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

For Paperwork Reduction Act Notice, see your tax return instructions.

888 Form Department of the Treasury Internal Revenue Service

Health Savings Accounts (HSAs)

OMB No. 1545-0074

2

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

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

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

2 '((

Name(s) shown on Form 1040, 1040-SR, or 1040-NR S	Social security nu	umber c	of HSA beneficiary.
PRI	YANKA GORI	123-45		As, see instructions. 9
Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance C	Contracts, if	requ	ired.
Par	HSA Contributions and Deduction. See the instructions before completing t and both you and your spouse each have separate HSAs, complete a separat			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) du See instructions	uring 2022.	□ Se	If-only 🗴 Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made	ade by the		
L	unextended due date of your tax return that were for 2022. Do not include employer cor contributions through a cafeteria plan, or rollovers. See instructions	ntributions,	2	0.
3	If you were under age 55 at the end of 2022 and, on the first day of every month during were, or were considered, an eligible individual with the same coverage, enter \$3,650 (family coverage). All others , see the instructions for the amount to enter	(\$7,300 for	3	7,300.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from F lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during include any amount contributed to your spouse's Archer MSAs	Form 8853, 2022, also	4	
5	Subtract line 4 from line 3. If zero or less, enter -0		4 5	0. 7,300.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and	had family	5	7,300.
	coverage under an HDHP at any time during 2022, see the instructions for the amount to en	iter	6	6,004.
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family under an HDHP at any time during 2022, enter your additional contribution amount. See ins		7	
8	Add lines 6 and 7		8	6,004.
9	Employer contributions made to your HSAs for 2022	833.		
10	Qualified HSA funding distributions			
11	Add lines 9 and 10		11	833.
12	Subtract line 11 from line 8. If zero or less, enter -0		12	5,171.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Pa		13	0.
Deut	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instruction			10.4
Part	a separate Part II for each spouse.		rate I	HSAs, complete
14a	Total distributions you received in 2022 from all HSAs (see instructions)		14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include a			
	contributions (and the earnings on those excess contributions) included on line 14a			
	withdrawn by the due date of your return. See instructions		14b	
C	Subtract line 14b from line 14a		14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)		15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, in amount in the total on Schedule 1 (Form 1040), Part I, line 8f		16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Addition Tax (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on li are subject to the additional 20% tax. Also, include this amount in the total on Schedu 1040), Part II, line 17c	le 2 (Form	17b	
Part		he instructi	ons b	
18	Last-month rule		18	
19	Qualified HSA funding distribution		19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I,		20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedu 1040), Part II, line 17d		21	

For Paperwork Reduction Act Notice, see your tax return instructions.

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