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

Submi	ssion Identification Number (SID)						
Taxpaye	er's name	Social securit	y numb	er			
SAN	KEERTH REDDY THOTLI	109-71-	109-71-7787				
Spouse	ial secu	ırity numb	er				
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re aut	thorizing	g.)		
Enter	whole dollars only on lines 1 through 5.						
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1		6,632.		
2	Total tax		2		7,426.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	4,545.		
4	Amount you want refunded to you		4		7,119.		
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of y	our ret	urn)		
return (to send for any Agent t paymer authori paymer busines taxes t person	oviledge 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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.s. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in 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 of I, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the positive confidential information necessary to answer inquiries and resolve issues related to the past identification number (PIN) below is my signature for the income tax return (original or amended) I and income tax return (original or amended) I and income tax return (original or amended) I and its resolve issues related to the past identification number (PIN) below is my signature for the income tax return (original or amended) I and its return (origina	tter, or electroction of the tr S. Treasury are cated in the ten to debit the ten the authorizates must be processing of ayment. I furt	nic retansmised its control it	urn origin ssion, (b) designated paration so this according to the latest of the latest of the latest original	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of the that the		
	yer's PIN: check one box only				1		
X	I authorize GLOBAL TAXES LLC to enter or generate r	Ent		7 8 7 digits, but r all zeros	as my		
	signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.						
Your s	ignature ▶ Date ▶						
Spous	se's PIN: check one box only				1		
. Г	I authorize to enter or generate r	ny PIN			as my		
_	ERO firm name	_	er five	digits, but	,		
	signature on the income tax return (original or amended) I am now authorizing.	dor	ı't ente	r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	III Certification and Authentication — Practitioner PIN Method Only						
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ente	6 6 erallze		8 9		
authori	with the above numeric entry is my PIN, which is my signature for the electronic individual income tax zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in a	ccordanc			
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. Nonresident Alien Income Tax Return

	2022
ı	

OMB No. 1545-0074

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

For the year Ja	ın. 1–C	Dec. 31, 2022, or other tax year begi	nning	, 2022,	ending	,	20		ee separate nstructions.
Filing Status		Single Married filing se	. , ,	,	ng surviving spouse		Es	tate	☐ Trust
Check only one box.					·	·			
Your first name	e and	middle initial	Last na	ame			Your id		ng number ns)
SANKEERT	H RE	DDY	THOT	LI			109-	71-7	7787
Home address	(num	ber and street). If you have a P.O. b	ox, see ins	tructions.			•		Apt. no.
9210 RED	MOND	WOODINVILLE RD NE			A3	03			
City, town, or p	ost o	ffice. If you have a foreign address,	also comp	lete spaces below.		State		ZIP cc	ode
REDMOND						WA		9805	527601
Foreign countr	y nam	е	Foreigr	n province/state/county		Foreign	postal co	de	
Digital Asset		ny time during 2022, did you: (a) receivise dispose of a digital asset (or					or (b) sell,		
Dependents	s					(4) Ch	eck the bo	x if quali	ifies for (see inst.):
(see instructions		(1) First name Last nam	20	(2) Dependent's identifying number	(3) Relationship to y	Chi	ld tax cred	it C	Credit for other
		(I) I list liame Last liam	ie .	identifying number	(3) Neiationship to y	ou			dependents
If more than fou	r 🖳								
dependents, sec							\dashv		
instructions and check here							$\overline{\Box}$		$\overline{}$
Income	 1a	Total amount from Form(s) W-2, b	ox 1 (see i	nstructions)			. 1a		72,738.
Effectively	b	Household employee wages not r	,	,					, _ , , , , , ,
Connected	С	Tip income not reported on line 1a		, ,					
With U.S.	d	Medicaid waiver payments not rep	`	,					
Trade or	е	Taxable dependent care benefits		` '	,				
Business	f	Employer-provided adoption bene		·			. 1f		
240000	g	Wages from Form 8919, line 6.		•			. 1g		
Attach	h	Other earned income (see instruct	ions) .				. 1h		
Form(s) W-2, 1042-S,	i	Reserved for future use							
SSA-1042-S,	j	Reserved for future use					. 1j		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fi	om Sched	ule OI (Form 1040-NR), i	tem L,				
here. Also		line 1(e)			1k				
attach	Z	Add lines 1a through 1h					. 1z		72,738.
Form(s) 1099-R if	2a	Tax-exempt interest	2a	b Tax	able interest		. 2b		
tax was	3a	Qualified dividends	3a	b Ord	linary dividends .		. 3b		
withheld.	4a	-	4a	b Tax	able amount		. 4b		
If you did not	5a	_	5a		able amount				
get a Form W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Sche							
	8	Other income from Schedule 1 (Fo						-	-5,506.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, an	d 8. This is	your total effectively c	onnected income		. 9	-	67,232.
	10	Adjustments to income:	. 00						
	a	From Schedule 1 (Form 1040), line				60	0.		
	b	Reserved for future use							
	C	Reserved for future use					10-		600
	d 11	Enter the amount from line 10a. The Subtract line 10d from line 9. This			600.				
	11	Subtract line 10d from line 9. This							66,632.
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)							12,950.
	13a	Qualified business income deduct							
	b	Exemptions for estates and trusts							
	С	Add lines 13a and 13b							
	14								12,950.
	15	Subtract line 14 from line 11. If ze	ro or less.	enter -U This is vour ta :	xable income .		. 15	1	53,682.

Form 1040-NR (2	2022)							Page 2
Tax and	16	Tax (see instructions). Check if any from F	orm(s): 1 88	314 2 497	72 3 🗌		16	7,426.
Credits	17	Amount from Schedule 2 (Form 1040), lir	ne 3				17	0.
	18	Add lines 16 and 17					18	7,426.
	19	Child tax credit or credit for other dependent	dents from Sched	ule 8812 (Form 10	040)		19	
	20	Amount from Schedule 3 (Form 1040), lir	ne 8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or le	ss, enter -0				22	7,426.
	23a	Tax on income not effectively connected Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment						
		line 21			23b			
	С.	Transportation tax (see instructions) .			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total t	ax				24	7,426.
Payments	25	Federal income tax withheld from:			1.			
	a	Form(s) W-2				1,545.		
	b	Form(s) 1099			25b			
	C	Other forms (see instructions)			25c		054	1/ 5/5
	d	Add lines 25a through 25c					25d	14,545.
	e	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S					25g	
	26	2022 estimated tax payments and amount					26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedule	•	•	28			
	29	Credit for amount paid with Form 1040-0			29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3 (Form 1040), lir			31		00	
	32 33	Add lines 28, 29, and 31. These are your					32	14 545
Defend		Add lines 25d, 25e, 25f, 25g, 26, and 32.					33	14,545.
Refund	34	If line 33 is more than line 24, subtract line Amount of line 34 you want refunded to			•		35a	7,119.
Direct deposit?	35a b	Routing number 0 5 3 0 0 0			Checking		SSA	7,119.
See instructions.	d	Account number 2 3 7 0 4 5			Criecking	Saviriys		
		If you want your refund check mailed to			oo not abour on	page 1		
	е							
	36	Amount of line 34 you want applied to y	our 2023 actimat	ad tav	36			
Amount	37	Subtract line 33 from line 24. This is the			00			
You Owe	0.	For details on how to pay, go to www.irs	-				37	
Tou Owe	38	Estimated tax penalty (see instructions)			38		0,	
Third		ou want to allow another person to discuss				es. Comple	ete belo	w. 🗵 No
Party	•	•	Phone					_
Designee	Designee's Phone Personal identifiname no. number (PIN)							
		penalties of perjury, I declare that I have examir they are true, correct, and complete. Declaration	ed this return and a					
Sign	Your	signature	Date	Your occupation	1	If the	IRS ser	nt you an Identity
Here	Jan Josephinen					Prote	ection Pl	IN, enter it here
				SOFTWARE I	DEV ENGINE	ER (see	inst.)	
	Phone	e no.	Email address					
Paid	Prepa	arer's name Prepare	er's signature		Date	PTIN	(Check if:
Preparer				R GUPTA TALLAM	02/24/2023	P02082	703	Self-employed
Use Only		s name SYAMIL PORBYAIR AM AS AGAS GURTA TAI						8)965-9522
Firm's address 2/5 DOONEY OF F DDINGWICK NT 08916 Firm's F							N 94	L_3171965

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

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

Internal Revenue Service		Sequence No. 01	
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soci	ial security number
SANKEERTH REDD	109-71	-7787	
Part I Addition	onal Income		

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-5,506.
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		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	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 1040-NR line 8	10	-5.506

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

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	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		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	600.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses	_	
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans		
g	Attorney fees and court costs for actions involving certain unlawful	_	
h	discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations		
i	Housing deduction from Form 2555		
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
K	1041)		
z	Other adjustments. List type and amount:		
_	24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	600.

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

2022
Attachment Sequence No. 7B

Name shown on Form 1040-NR Your identifying number SANKEERTH REDDY THOTLI 109-71-7787

Enter a	amount of income und	er the	appropriate rate of tax. See instructions.							
	Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Othe	er (specify)	
						(2) 1070	(2) 1070	(0, 0070	%	%
1	Dividends and divide		•							
а	Dividends paid by U.		·		1a					
b		_	corporations		1b					
С	Dividend equivalent p	ayme	nts received with respect to section 871(m) tra	ansactions	1c					
2	Interest:									
а					2a					
b			ns		2b					
С					2c					
3	Industrial royalties (p	atent	s, trademarks, etc.)		3					
4			right royalties		4					
5		_	s, recording, publishing, etc.)		5					
6			natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	If zero or less, ente	r -0	Canada only. Enter net income in column (c).							
а	Winnings									
b					10c					
11	Gambling winnings –	-Resi	dents of countries other than Canada.		11					
12					<u> </u>					
12					12					
13			columns (a) through (d)		13					
14	-		f tax at top of each column		14					
15			ely connected with a U.S. trade or business		nns (a)	through (d) of line 1	4. Enter the total here	and on Form 1040	-NR, line 23a 15	
			Capital Gains and	Losses I	From	Sales or Excha	anges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
(Form 1	•									
exchan	property sales or ges that are effectively									
connec	ted with a U.S. business edule D (Form 1040).)
	797, or both.	18	Capital gain. Combine columns (f) and (g	g) of line 17	7. Ente	er the net gain her	re and on line 9 ab	ove. If a loss, ente	er -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

Answer all questions.

2022 Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR Your identifying number 109-71-7787 SANKEERTH REDDY THOTLI Α Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. Ε immigration status on the last day of the tax year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2022. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States Date departed United States mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2020 ______, 2021 ______, and 2022 ______365 ___. Did you file a U.S. income tax return for any prior year? X Yes No Т If "Yes," give the latest year and form number you filed: 1040NR X No Ves J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a Yes No Κ Yes X No No If "Yes," did you use an alternative method to determine the source of this compensation? L Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. M Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

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

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

2022
Attachment Sequence No. 13

Your social security number

SAN	KEERTH REDDY THOTLI						109-7	1-7787	
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s) 1	099? 5	See ins	structions .		. Y e	es 🛛 No
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF								
Α	CHANDA NAGAR RANGAREDDY DIST TELANGANA		-	1					
В	CHANDA NAGAK KANGAKEDDI DIGI TEHANGANA	7 TIA	300030						
C									
1b	Type of Property (from list below) 2 For each rental real estate property list above, report the number of fair rental				Fa	ir Rental Days	Person Da		QJV
Α	personal use days. Check the Qu			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quainied joint venture. See instru	Ctions	·.	С					
Туре	of Property:								
	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descr	ibe)		
						Propertie			
Incon	ne:			Α		В			С
3	Rents received	3		4	10.				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		8	50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		5	60.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			58.				
15	Supplies	15		1,5	23.				
16	Taxes	16		1 0	0.5				
17	Utilities	17		1,0	25.				
18	Depreciation expense or depletion	18							
19 20	Other (list) Total expenses. Add lines 5 through 19	19 20		5,9	16				
		20		5,9	10.				
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		-5,5	06.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-5,50	06.)	()	()
23 a	Total of all amounts reported on line 3 for all rental prope	rties			23a		410.		
b	Total of all amounts reported on line 4 for all royalty properties	erties			23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	5	,916.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat							(5,506.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not s Schedule 1 (Form 1040), line 5. Otherwise, include this ar						n · 26		-5,506.

Health Savings Accounts (HSAs)

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

OMB No. 1545-0074 Attachment

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

109-71-7787

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

SANKEERTH REDDY

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

Sequence No. **52**

Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, it	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	X 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	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	1,656.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	1,994.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	arate I	HSAs, complete
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	<i>,</i> ,		oforo
rait	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	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	

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