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

2022

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the na	ame of y	ed filing separately (Nour spouse. If you ch	,		household (HOH)  QSS box, enter the	spo	lifying sur use (QSS) name if tl	Ü
		on is a child but not your dependent						L		
Your first name		ddle initial	Last nar					Your social security number		
PAVAN KU			POSA						75-702	
If joint return, s	pouse's	first name and middle initial	Last nar	me				Spouse	s social se	curity number
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.			ion Campaign
498 PIN	OAK	DR							nere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	e	ZIP code			ntly, want \$3 Checking a
SUNNYVAI	ıΕ				CA		94086	box bel	ow will not	t change
Foreign country	name		F	Foreign province/state/o	county	y	Foreign postal code	your tax	or refund	
Digital	Λ+ on	y time during 2022, did you: (a) rec	oivo (oo	a roward award or	n 0) /m	ant for propo	rty or por (igos); or	(b) coll	∐ You	Spouse
Digital Assets		ange, gift, or otherwise dispose of a	,				,		☐ Yes	⊠ No
Standard	Som	eone can claim: You as a de	pendent	Your spouse	e as a	a dependent				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before January	2, 1958	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see	instructions):
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child tax c	redit	Credit for ot	ther dependents
than four										
dependents, see instructions	3 ——									
and check										
here										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)				. 1a	2	17,654.
	b	Household employee wages not re	eported	on Form(s) W-2				. 1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•		•			. 10	:	
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						. 1e		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						. 1f		
If you did not	g	Wages from Form 8919, line 6 .						. 1g		
get a Form W-2, see	h	Other earned income (see instruct						. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>li</u>				
	Z	Add lines 1a through 1h						. 1z		17,654.
Attach Sch. B	2a		2a	722		axable interest		. 2b		
if required.	<u>3a</u>		3a	733.		rdinary divider		. 3b		735.
	4a		4a			axable amoun				
Standard Deduction for—	5a		5a				t			
Single or	6a		6a				t	. 6b		
Married filing separately,	_ C	If you elect to use the lump-sum e		•	`	,		╡ 듣		0 101
\$12,950	7	Capital gain or (loss). Attach Sche						_   7		-2,191.
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin						. 8		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9		16,198.
\$25,900	10	Adjustments to income from Sche	,					. 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	•					. 11		<u>16,198.</u>
\$19,400	12	Standard deduction or itemized		•	,			. 12		12,950.
If you checked any box under	13	Qualified business income deduct						. 13	_	10 050
Standard Deduction,	14			ontor O This is w						12,950.
see instructions.	15	Subtract line 14 from line 11. If zer	o or iess	s, enter -u This is y	our <b>t</b> a	axable Incom		. 15		03,248.

Form 1040 (2022	2)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	45,146.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	45,146.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	2,643.
	21	Add lines 19 and 20	21	2,643.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	42,503.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	23.
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	42,526.
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	36,104.
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	
	33	Add lines 25d, 26, and 32. These are your total payments	33	36,104.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	
riciana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings		
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		
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	6,509.
	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	structions	below.	<b>X</b> No
		signee's Phone Personal identine no. Personal identinumber (PIN)	fication	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete, Declaration of preparer (other than taxpayer) is based on all information of whic		
Here				ent you an Identity
	10			PIN, enter it here
Joint return?		SOFTWARE ENGINEER (see	inst.)	
See instructions. Keep a copy for your records.	Sp	Iden		nt your spouse an ection PIN, enter it here
	Ph	one no. (650)501-8827 Email address PAVAN.POSA@GMAIL.COM		
Daid	Pre	eparer's name Preparer's signature Date PTIN		Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/30/2023 P0208	2703	Self-employed
Preparer	Fir			(678)965-9522
Use Only	Fire		ı's FIN	84-3171965

#### SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

#### **Additional Taxes**

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 02

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

Your social security number 162-75-7027

Pa	rt I Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income.  Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	23.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(co	ontini	ued on page 2

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

Schedule 2 (Form 1040) 2022

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

### Part II Other Taxes (continued)

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

# SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

### **Additional Credits and Payments**

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 03

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

Your social security number 162-75-7027

Par	t I Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	2,643.
2	Credit for child and dependent care expenses from Form 2441, Form 2441	2		
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695	,	5	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800 6	а		
b	Credit for prior year minimum tax. Attach Form 8801	0		
С	Adoption credit. Attach Form 8839	C		
d	Credit for the elderly or disabled. Attach Schedule R 60	d		
е	Alternative motor vehicle credit. Attach Form 8910 60	е		
f	Qualified plug-in motor vehicle credit. Attach Form 8936 6	f		
g	Mortgage interest credit. Attach Form 8396	g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6	h		
i	Qualified electric vehicle credit. Attach Form 8834 6	i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911 6	j		
k	Credit to holders of tax credit bonds. Attach Form 8912 6	k		
1	Amount on Form 8978, line 14. See instructions 6	I		
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-Sl	R, or 1040-NR,		
	line 20		8	2,643.
		(C)	ווווווווו	ued on page 2)

Schedule 3 (Form 1040) 2022 Page **2** 

Par	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	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a b	Form 2439		
С	Reserved for future use		
d	Credit for repayment of amounts included in income from earlier years		
е	Reserved for future use		
f	Deferred amount of net 965 tax liability (see instructions) 13f		
g	Reserved for future use		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021		
Z	Other payments or refundable credits. List type and amount:		
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	4-	

#### **SCHEDULE D** (Form 1040)

#### **Capital Gains and Losses**

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

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

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service

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

Your social security number 162-75-7027

	VIII ROTHIC LODII			1 102	, 5	7027
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•	_		
Pa	Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
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 I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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 <b>Box A</b> checked	29,137.	31,328.			-2,191.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	mn (h). If you have the back		7	-2,191.
Pai						
	instructions for how to figure the amounts to enter on the	norum, ricocto i		(g)	(000)	(h) Gain or (loss)
	below.	(d)	(e)	Adjustmen		Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	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					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
13					13	
	Long-term capital loss carryover. Enter the amount, if any					
	Worksheet in the instructions				14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back	through 14 in co	olumn (h). Then, go	to Part III	15	

BAA

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -2,191. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 2,191.) • (\$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.

## 8949

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

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number
PAVAN KUMAR POSA	162-75-7027

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.

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. 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). (e) (h) Cost or other basis enter a code in column (f). Gain or (loss) (d) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (see instructions) (Mo., day, yr.) in the separate (a) Code(s) from Amount of adjustment instructions. with column (a). instructions 01/01/22 12/31/22 29,137 31,328. -2,191.

ROBINHOOD SECURITIES LLC 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 29,137. 31,328. -2,191. above is checked), or line 3 (if Box C above is checked) .

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

Foreign Tax Credit (Individual, Estate, or Trust)

OMB No. 1545-0121 Attachment Sequence No. 19

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.  $\,$   $^{\rm COPY}$   $\,^{\rm 1}$ Go to www.irs.gov/Form1116 for instructions and the latest information.

Vame	·			Identify	ing number a	s shown o	on page	e 1 of your tax return	
PAV	YAN KUMAR POSA			162-	75-7027				
	se a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 116. Report all amounts in U.S. dollars except where specified in Part II below.								
	Section 951A category income c Passive category income d General category income c Section 901(j) inco								
. B	esident of (name of country) USA								
Note	: If you paid taxes to only one foreign country or U.S. than one foreign country or U.S. possession, use a							ou paid taxes to	
	t I Taxable Income or Loss From Sources							) (NO)	
га	Taxable illcome of Loss From Sources		eign Country			HECKE	J abc	Total	
	Fatouth a name of the femilian assertion on U.O.	A	eigii Oodiid	В	C		(Add	cols. A, B, and C.)	
	Enter the name of the foreign country or U.S. possession	India					7		
1a	Gross income from sources within country shown above and of the type checked above (see instructions): WAGES								
		30,65	53.				1a	30,653.	
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions								
Dedu	ctions and losses (Caution: See instructions.):								
2	Expenses <b>definitely related</b> to the income on line 1a (attach statement)								
3	Pro rata share of other deductions <b>not definitely</b> related:								
а	Certain itemized deductions or standard deduction (see instructions)	12,95	50.						
b	A 1.1.11 0 1.01	12,95							
d		30,65							
е		218,38							
f	Divide line 3d by line 3e (see instructions)	0.14							
g	Multiply line 3c by line 3f	1,81	L8.						
4	Pro rata share of interest expense (see instructions):								
а	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)								
b	Other interest expense								
5	Losses from foreign sources								
6	Add lines 2, 3g, 4a, 4b, and 5	1,81					6	1,818.	
7	Subtract line 6 from line 1a. Enter the result here and till Foreign Taxes Paid or Accrued (see instr		ge 2				7	28,835.	
Par	Credit is claimed	ructions)							
	for taxes (you must check one)	Fore	eign taxes paid	d or accrued					
Country	(j) Paid In foreign currency				In U.S. do	ollars			
	(k) Accrued Taxes withheld at source on:	(p) Other	Taxes w	rithheld at sour	ce on:	(t) Oth		(u) Total foreign	
Ö	(I) Date paid or accrued (m) Dividends (n) Rents and royalties (o) Interes	foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	foreign f paid accru	or	taxes paid or accrued (add cols. (q) through (t))	
Α									
В									
С									
8	Add lines A through C, column (u). Enter the total	here and on li	ne 9, page 2	2			8		

Page 2

Dort	III Figuring the Credit				
	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9			
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10	2,643.		
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11	2,643.		
12	Reduction in foreign taxes (see instructions)	12	( )		
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes a	availa	able for credit	14	2,643.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	28,835.		
16	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	28,835.		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	202,812.		
	<b>Caution:</b> If you figured your tax using the lower rates on qualified di instructions.	vider	nds or capital gains, see		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	0.1422
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, lin 1040), line 2. Estates and trusts: Enter the amount from Form 1041				
	total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and tr from Form 1040-NR, line 16. See instructions			20	45,146.
	<b>Caution:</b> If you are completing line 20 for separate category <b>g</b> (lump-surform 8978, Partner's Additional Reporting Year Tax, see instructions.	ım di:	stributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	6,420.
22	Increase in limitation (section 960(c))			22	
23	Add lines 21 and 22			23	6,420.
24	Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116				,
	through 32 and enter this amount on line 33. Otherwise, complete the a				
	instructions			24	2,643.
Part	IV Summary of Credits From Separate Parts III (see instru	ctio	ns)		
25	Credit for taxes on section 951A category income	25			
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income	27			
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
31	Credit for taxes on lump-sum distributions	31			
32	Add lines 25 through 31		1	32	
33	Enter the <b>smaller</b> of line 20 or line 32			33	2,643.
34	Reduction of credit for international boycott operations. See instruction			34	۷,043.
	• • •			34	
35	Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter he 1040), line 1: Form 1041, Schedule G, line 2a; or Form 990-T, Part III, lir			35	2,643.

#### **SCHEDULE B** (Form 1116)

(Rev. December 2022)

Department of the Treasury Internal Revenue Service

#### Foreign Tax Carryover Reconciliation Schedule

, or other tax year beginning , and ending See separate instructions.

Attach to Form 1116.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

COPY 1

ivan	ie							ge 1 of your tax return
PA	VAN KUMAR POSA				,		' '	-75-7027
Use	a separate Schedule B (Form 1116) f	or each applicable	category of income I	isted below. See ins	tructions. Check on	ly one box on each	schedule.	
Che	ck the box for the same separate cate	egory code as that	shown on the Form	1116 to which this S	chedule B is attache	ed.		
а	Reserved for future use		e category income	e Section 9	• /	• -	_ump-sum distribut	ions
b	☐ Foreign branch category income		al category income		come re-sourced by	•		
h	If box e is checked, enter the countr							
i	If box f is checked, enter the country	y code for the treat	y country. See instru	ctions				
	Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	<b>(iv)</b> 7th Preceding Tax Year	(v) 6th Preceding Tax Year	<b>(vi)</b> 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1	Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))	0.	0.	0.	0.	0.	0.	0.
2	Adjustments to line 1 (enter description—see instructions):							
a	Carryback adjustment (see instructions)							
b	Adjustments for section 905(c) redeterminations (see instructions)	0.	0.	0.	0.	0.	0.	0.
С		0.	0.	0.	0.	0.	0.	0.
d		0.	0.	0.	0.	0.	0.	0.
e		0.	0.	0.	0.	0.	0.	0.
f		0.	0.	0.	0.	0.	0.	0.
g		0.	0.	0.	0.	0.	0.	0.
3	Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)	0.	0.	0.	0.	0.	0.	0.
4	Foreign tax carryover used in current tax year (enter as a negative number)	0.	0.	0.	0.	0.	0.	0.
5	Foreign tax carryover expired unused in current tax year (enter as a negative number)	0.						0.
6	Foreign tax carryover generated in current tax year							
7	Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8	Foreign tax carryover to the following tax year. Combine lines 3 through 7.	-0-	0.	0.	0.	0.	0.	0.

Schedule B (Form 1116) (Rev. 12-2022)

	Foreign Tax Carryover Reconciliation (continued)	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1	Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))	0.	0.	0.	0.	2,643.		2,643.
2	Adjustments to line 1 (enter description—see instructions):							
а	Carryback adjustment (see instructions)					0.		0.
b	Adjustments for section 905(c) redeterminations (see instructions)	0.	0.	0.	0.	0.		0.
С		0.	0.	0.	0.	0.		0.
d		0.	0.	0.	0.	0.		0.
е		0.	0.	0.	0.	0.		0.
f		0.	0.	0.	0.	0.		0.
g		0.	0.	0.	0.	0.		0.
3	Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.	0.	0.	0.	0.	2,643.		2,643.
4	Foreign tax carryover used in current tax year (enter as a negative number)	0.	0.	0.	0.	-2,643.		-2,643.
5	Foreign tax carryover expired unused in current tax year (enter as a negative number)	0.						0
6	Foreign tax carryover generated in current tax year						0.	0.
7	Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)						0.	0.
8	Foreign tax carryover to the following tax year. Combine lines 3 through 7.	0.	0.	0.	0.	0.	0.	0.
_	,	0.	0.	0.	0.	0.	0.	<u> </u>

BAA REV 03/18/23 PRO Schedule B (Form 1116) (Rev. 12-2022)

## Form **8889**

Department of the Treasury

### **Health Savings Accounts (HSAs)**

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

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

OMB No. 1545-0074

2022
Attachment
Sequence No. 52

Internal Revenue Service Go to www.
Name(s) shown on Form 1040, 1040-SR, or 1040-NR

PAVAN KUMAR POSA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 162-75-7027

Betoi	<b>re you begin:</b> Complete Form 8853, Archer MSAs and Long-Term Care Insuran	ice Contracts, if	requ	red.	
<b>HSA Contributions and Deduction.</b> See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.					
1	Check the box to indicate your coverage under a high-deductible health plan (HDH See instructions	<b>X</b> Se	lf-only   Family		
2	HSA contributions you made for 2022 (or those made on your behalf), including those unextended due date of your tax return that were for 2022. <b>Do not</b> include employed contributions through a cafeteria plan, or rollovers. See instructions	er contributions,	2	0.	
3	If you were under age 55 at the end of 2022 and, on the first day of <b>every</b> month dowere, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3, 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 fr lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time drinclude 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	Subtract line 4 from line 3. If zero or less, enter -0			3,000.	
•	coverage under an HDHP at any time during 2022, see the instructions for the amount to enter			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. Se		7	0.	
8	Add lines 6 and 7		8	3,650.	
9	Employer contributions made to your HSAs for 2022	1,000.			
10	Qualified HSA funding distributions				
11	Add lines 9 and 10		11	1,000.	
12	Subtract line 11 from line 8. If zero or less, enter -0		12	2,650.	
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040)	* *	13	0.	
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instru				
Part	a separate Part II for each spouse.	•	rate F	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 included contributions (and the earnings on those excess contributions) included on line withdrawn by the due date of your return. See instructions	14a that were	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 A amount in the total on Schedule 1 (Form 1040), Part I, line 8f	lso, include this	16		
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Add Tax</b> (see instructions), check here	itional 20%			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included are subject to the additional 20% tax. Also, include this amount in the total on Sc 1040), Part II, line 17c	hedule 2 (Form	17b		
Part		See the instructi		efore	
	completing this part. If you are filing jointly and both you and your spouse complete a separate Part III for each spouse.	e each have sep			
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), P	art I, line 8f .	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Sci 1040). Part II, line 17d	chedule 2 (Form	21		

BAA

# 8959 Form

Department of the Treasury Internal Revenue Service

#### **Additional Medicare Tax**

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

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

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

OMB No. 1545-0074

2022
Attachment Sequence No. 71

Name(s) shown on return
PAVAN KUMAR POSA

Your social security number

162-75-7027

Part	Additional Medicare Tax on Medicare Wages		
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
	Form W-2, enter the total of the amounts from box 5		
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3		
5	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 200,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	6	2,501.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to	P	
	Part II	7	23.
Part	II Additional Medicare Tax on Self-Employment Income		
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 8		
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0		
12	Subtract line 11 from line 8. If zero or less, enter -0	12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and		
	go to Part III	13	
Part			
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
	(see instructions)		
15	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).	4-	
Dout	Enter here and go to Part IV	17	
Part			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR	40	0.2
Part	or 1040-SS filers, see instructions), and go to Part V	10	23.
	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
19	W-2, enter the total of the amounts from box 6		
20	Enter the amount from line 1	-	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
21	withholding on Medicare wages		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax		
	withholding on Medicare wages	22	23.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box		
20	14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with		
<u>_</u> -T	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or		
	1040-SS filers, see instructions)	24	23.

BAA

## Form **8960**

Net Investment Income Tax— Individuals, Estates, and Trusts

Attach to your tax return.

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

OMB No. 1545-2227

2022
Attachment Sequence No. 72

Department of the Treasury
Internal Revenue Service

Name(s) shown on your tax return

PAVAN KUMAR POSA

Your social security number or EIN 162-75-7027

Part	Investment Income ☐ Section 6013(g) election (see instructions)		l		
	Section 6013(h) election (see instructions)				
	☐ Regulations section 1.1411-10(g) election (see in	nstruct	tions)		
1	Taxable interest (see instructions)			1	
2	Ordinary dividends (see instructions)			2	735.
3	Annuities (see instructions)				
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a			
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)				
С	Combine lines 4a and 4b			4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	-2,191.		
b					
C	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			0 101
d	Combine lines 5a through 5c			5d	-2,191.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7	Other modifications to investment income (see instructions)			7	1 456
8 Part	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			0	-1,456.
9a	Investment interest expenses (see instructions)	9a	113		
b	State, local, and foreign income tax (see instructions)	9b			
C	Miscellaneous investment expenses (see instructions)	9c			
d				9d	
10	Additional modifications (see instructions)			10	
11	Total deductions and modifications. Add lines 9d and 10			11	
Part					
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, of	compl	ete lines 13-17.		
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0			12	0.
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	216,198.		
14	Threshold based on filing status (see instructions)	14	200,000.		
15	Subtract line 14 from line 13. If zero or less, enter -0	15	16,198.		
16	Enter the smaller of line 12 or line 15	<del></del>		16	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Ent	ter he	ere and include		
	on your tax return (see instructions)			17	0.
	Estates and Trusts:				
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b			
С	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b			
С		19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.0				
	include on your tax return (see instructions)			21	