Tear off here

4

E **1040-ES (NR)** Department of the Treasury



ŭ	Internal Revenue Service	ent Voucher		OMB No. 154	45-0074		
File	only if you are making a payment of esti	Calendar year – Due Jan. 16, 2024					
νοι	icher with your check or money order pay		mated tax you are				
ide	ntifying number and "2023 Form 1040-ES	paying by check or	Dollars	Cents			
cas	h. Enclose, but do not staple or attach, y	money order.	304.				
	Your identifying number (SSN or ITIN) (emplo	yer identification number for an estate or trust)					
	172-88-0503						
	Your first name and middle initial	Your last name					
-							
type	BHAVISHYA	KONATHAM					
٦	Address (number street and apt no.)						

 1100 E LEMON STREET, Apt. B207

 City town or post office. If you have a foreign address.

City, town, or post office. If you have a foreign address, also TEMPE	o complete spaces below.	State AZ	ZIP code 85281
Foreign country name	Foreign province/state/county		Foreign postal code

For Privacy Act and Paperwork Reduction Act Notice, see instructions. BAA

REV 03/24/23 PRO

ъ	1040-ES (NR) Department of the Treasury	2023	Estimate Payment	d Tax Vouche	r 3			OMR No. 1	545 0074	
	Internal Revenue Service				check or money order. Retur	n this	Calendar vez	OMB No. 13 ar-Due Sept. 15,		
					ed States Treasury." Write y			mated tax you are		
ide		2023 Form 1	1040-ES (NF	R)" on you	Ir check or money order. Do		paying by check or money order.	Dollars 304.	Cents	
					on number for an estate or trust)					
	Your first name and m	iddle initial	Yo	our last nam	ne					
Print or type	BHAVISHYA			KONATHA	AM					
rint o	Address (number, street, and apt. no.) 1100 E LEMON STREET, Apt. B207									
	City, town, or post office. If you have a foreign address, a TEMPE				o complete spaces below.	Stat AZ		ZIP code 85281		
	Foreign country name				Foreign province/state/county			Foreign postal	code	
For	Privacy Act and Paper	work Reduct	tion Act Noti	ce, see ins	tructions. BAA		REV 03/2	24/23 PRO		
					Tear off here					
Form	1040-ES (NR)		Fstimate	d Tax	0					
9	Department of the Treasury Internal Revenue Service	2023	Estimate Payment	Vouche	r Z			OMB No. 1	545-0074	
					check or money order. Retur			ar—Due June 15,		
					ed States Treasury." Write y		Amount of esting paying by	mated tax you are	ax you are	
	ntifying number and " h. Enclose, but do no				ir check or money order. Do with this voucher.	not send	check or money order.	Dollars 304.	Cents	
	Your identifying number 172-88-0503	er (SSN or ITIN	N) (employer i	identificatio	on number for an estate or trust)					
	Your first name and middle initial Your last na				ne					
r type	BHAVISHYA KONATHAM									
Print or type	Address (number, street, and apt. no.) 1100 E LEMON STREET, Apt. B207									
-	City, town, or post office TEMPE	ce. If you have	e a foreign ad	ldress, also	complete spaces below.	te	ZIP code 85281			
	Foreign country name				Foreign province/state/county			Foreign postal code		
For	Privacy Act and Paper	work Reduct	tion Act Noti	ce, see ins	structions. BAA		REV 03/2	24/23 PRO		
					Tear off here					
Ê	1040-ES (NR) Department of the Treasury Internal Revenue Service	2023	Estimate Payment	d Tax Vouche	r 1			OMB No. 1	545-0074	
					check or money order. Retur	n this	Calendar yea	ar-Due April 18,		
	5 5	0 1 2			ed States Treasury." Write			mated tax you are		
ide		2023 Form 1	1040-ES (NF	R)" on you	Ir check or money order. Do		paying by check or money order.	Dollars	Cents	
					on number for an estate or trust)					
	Your first name and middle initial Your last name									
type	BHAVISHYA	ONATHAI	М							
Print or type	Address (number, street, and apt. no.) 1100 E LEMON STREET, Apt. B207									
Ē					complete spaces below.	Stat AZ		ZIP code 85281		
	Foreign country name				Foreign province/state/county			Foreign postal	code	

For Privacy Act and Paperwork Reduction Act Notice, see instructions. BAA

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.

Submission Identification Number (SID)

l axpayer's name	Social security number							
BHAVISHYA KONATHAM	172-88-0503							
Spouse's name	Spouse's social security number							
Part I Tax Return Information – Tax Year Ending December 31, 2022	22 (Enter year you are authorizing.)							
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 26,640.							
2 Total tax	2 1,375.							
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 159.							
4 Amount you want refunded to you	4							
5 Amount you owe	· · · · · · 5 1,216.							
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)								

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

				EBO firm name		Er	1
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		
			-			IX	ί

8	0	5	0	3	as my
Ent don	,				

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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's	PIN:	check	one	box	only	
----------	------	-------	-----	-----	------	--

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name 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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature >	Dat	te 🕨										
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	y your five-digit self-selected PIN.	2	2				6 nter a		9	8	9	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >			
ERO Must Retain This Fo Don't Submit This Form to the II			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/24/23 PRO	Form 8879 (Rev. 01-2021)

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2022**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

TEMPE AZ 85281

BHAVISHYA



Form 1040-V Payment Voucher

Use this voucher when making a payment with Form 1040. Do not staple this voucher or your payment to Form 1040.

Make your check or money order payable to the 'United States Treasury.'

1100 E LEMON STREET B207

► Write your social security number (SSN) on your check or money order.

KONATHAM

Enter the amount of your payment . . 1555

1,216.

REV 03/24/23 PRO

INTERNAL REVENUE SERVICE

P.O. BOX 1303 CHARLOTTE, NC 28201-1303

2 IU4]- 	NR Department of the Treasury-Inter U.S. Nonresident AI	mal Revenue Se ien Incon	ervice 1e Tax Return	2022	OMB No. 15	645-0074	IRS Use Only-Do not w or staple in this space
		Dec. 31, 2022, or other tax year beginr						See separate instructions.
Filing Status		Single Married filing sep			g surviving spous is a child but not	. ,	Es	
Check only one box.								
Your first nam	e and	middle initial	Last name					lentifying number
							`	structions)
BHAVISHY		nber and street). If you have a P.O. bo	KONATHA				172-	-88-0503
1100 E L			, see instructi	10115.	в	207		Apt. no.
		office. If you have a foreign address, al	so complete s	spaces below.		State		ZIP code
TEMPE						AZ		85281
Foreign count	ry nan	ne	Foreign prov	vince/state/county		Foreign	postal co	de
Digital Asset	S At a	any time during 2022, did you: (a) rece erwise dispose of a digital asset (or a	ive (as a rewa financial intere	rd, award, or payme est in a digital asset)	nt for property or ? (See instructions	services); c s.)	r (b) sell,	exchange, gift, or . Yes X N
Dependent				,	(x if qualifies for (see ins
(see instructions				(2) Dependent's dentifying number		Chi	ld tax cred	Lit Credit for other
		(1) First name Last name			(3) Relationship to	you		dependents
If more than fou								
dependents, se instructions and	-							
check here								
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see instru	ctions)			. 1a	26,640
Effectively	b	Household employee wages not rep						
Connected	С	Tip income not reported on line 1a (
With U.S.	d	Medicaid waiver payments not repo						
Trade or	e	Taxable dependent care benefits fro					. 1e	
Business	f	Employer-provided adoption benefi Wages from Form 8919, line 6						
Attach	9 h							
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 fro	m Schedule C	01 (Form 1040-NR), ite	em L,			
here. Also		line 1(e)			. 1k			
attach Form(s)	z	Add lines 1a through 1h	1	1				
1099-R if	2a	Tax-exempt interest 2			able interest			
tax was withheld.	3a	Qualified dividends 3			nary dividends .			
If you did not	4a 5a	IRA distributions 44 Pensions and annuities 56			able amount			
get a Form	5a 6	Reserved for future use	-					
W-2, see instructions.	7	Capital gain or (loss). Attach Sched						
instructions.	8	Other income from Schedule 1 (For						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is your	total effectively co	onnected income		. 9	26,640
	10	Adjustments to income:						
	а	From Schedule 1 (Form 1040), line 2						
	b	Reserved for future use						
	c	Reserved for future use						
	d	Enter the amount from line 10a. The	-	-				
	11	Subtract line 10d from line 9. This is	-					26,640
	12	Itemized deductions (from Schedu deduction (see instructions)	•			di a, standa dn_US/India_Tre		12,950
	13a	Qualified business income deductio			1 1			12,500
	b	Exemptions for estates and trusts o						
	с	Add lines 13a and 13b					. 13	
	14	Add lines 12 and 13c					. 14	12,950
		Subtract line 14 from line 11. If zero						

Form 1040-NR (2022)							Page 2
Tax and	16	Tax (see instructions). Check if any from For	rm(s): 1 🗌 88	314 2 497	2 3		16	1,436.
Credits	17	Amount from Schedule 2 (Form 1040), line					17	0.
	18	Add lines 16 and 17					18	1,436.
	19	Child tax credit or credit for other depende	ents from Sched	ule 8812 (Form 10	40)		19	i
	20	Amount from Schedule 3 (Form 1040), line	8				20	61.
	21	Add lines 19 and 20					21	61.
	22	Subtract line 21 from line 18. If zero or less					22	1,375.
	23a	Tax on income not effectively connected w						
		Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment ta					-	
				().	23b			
	с	Transportation tax (see instructions)			23c		-	
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total ta					24	1,375.
Dovmonto	25	Federal income tax withheld from:	A				27	
Payments		Form(s) W-2			25a	159.		
	a ⊾					109.	-	
	b	Form(s) 1099			25b		-	
	C	Other forms (see instructions)			25c		05.4	159.
	d	Add lines 25a through 25c					25d	109.
	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 8			28		-	
	29	Credit for amount paid with Form 1040-C			29		-	
	30	Reserved for future use			30			
	31	Amount from Schedule 3 (Form 1040), line			31			
	32	Add lines 28, 29, and 31. These are your t					32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. 1					33	159.
Refund	34	If line 33 is more than line 24, subtract line					34	
	35a	Amount of line 34 you want refunded to y					35a	
Direct deposit? See instructions.	b	Routing number X X X X X X X		с Туре:		Savings		
See instructions.	d	Account number X X X X X X X						
	е	If you want your refund check mailed to a	n address outsic	e the United State	es not show	n on page 1,		
		enter it here.			1		.	
	36	Amount of line 34 you want applied to yo	ur 2023 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	-					
You Owe		For details on how to pay, go to www.irs.g	3				37	1,216.
	38	Estimated tax penalty (see instructions)			38			
Third	Do yo	ou want to allow another person to discuss t	his return with th	e IRS? See instru	ctions.	Yes. Comp	lete bel	ow. 🛛 No
Party	Desig	nee's	Phone			ersonal identif	ication _r	
Designee	name					umber (PIN)	L	
		penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration						
Sign	,		、	,				, 0
-	Your	signature	Date	Your occupation				ent you an Identity PIN, enter it here
Here				PROJECT ENG	STNEER T		inst.)	
	Phone	<u>e no</u>	Email address	11.00201 2	,	(
Dela			's signature		Date	PTIN		Check if:
Paid	•		0	R GUPTA TALLAM	04/18/20		2703	Self-employed
Preparer		sname GLOBAL TAXES LLC				Phone r		78)965-9522
Use Only		address 245 ROONEY CT E BI	NINGWICK N	т 08816		Firm's E	(4-3171965
Go to www.irs		rm1040NR for instructions and the latest inform		5 00010	REV 03/24/			orm 1040-NR (2022)
	,				INE V US/24/		10	

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074 0

2

2

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.					Att Se	tachment equence No. 03
	. ,	orm 1040, 1040-SR, or 1040-NR			cial se 38-05	ecurity number
		fundable Credits		11/2 (0 05	0.5
1	Foreign tax	credit. Attach Form 1116 if required			1	
2	0	child and dependent care expenses from Form 244	1, line 11	Attach	2	
3	Education c	redits from Form 8863, line 19			3	
4	Retirement	savings contributions credit. Attach Form 8880			4	61.
5	Residential	energy credits. Attach Form 5695			5	
6	Other nonre	fundable credits:				
а	General bus	siness credit. Attach Form 3800	6a			
b	Credit for p	rior year minimum tax. Attach Form 8801	6b			
С	Adoption cr	edit. Attach Form 8839..............	6c			
d	Credit for th	e elderly or disabled. Attach Schedule R	6d			
е	Alternative r	motor vehicle credit. Attach Form 8910	6e			
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936	6f			
g	Mortgage in	iterest credit. Attach Form 8396	6g			
h	District of Co	olumbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6ј			
k	Credit to ho	lders of tax credit bonds. Attach Form 8912	6k			
I	Amount on	Form 8978, line 14. See instructions	61			
z	Other nonre	fundable credits. List type and amount:				
	 Internal Revenue Service Name(s) shown on F BHAVISHYA KON Part I Nonres 1 Foreign tax 2 Credit for Form 2441 3 Education of A Retirement 5 Residential 6 Other nonros a General bus b Credit for p c Adoption c d Credit for the Alternative f Qualified play g Mortgage in h District of C i Qualified el j Alternative k Credit to hos I Amount on z Other nonros 		6z			
7	Total other	nonrefundable credits. Add lines 6a through 6z			7	
BHAV Part 1 2 3 4 5 6 a 5 6 a b c d e f g h i j k I z 7 8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR,					
	line 20			•••	8	61.
For Pa	perwork Reduct	ion Act Notice, see your tax return instructions. BAA	REV 03/24/23			ed on page e 3 (Form 1040) 20

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	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g h	Reserved for future use	13g 13h		
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 line 31	-SR, or 1040-NR,	15	
	BAA REV	03/24/23 PRO	Schedule 3	(Form 1040) 202

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.



Name shown on Form 1040-NR

172-88-0503

BHAVI	SHIA	KON	ATHA	ЧM			

Enter a	amount of income under the appropriate rate of tax. See instructions.							
	Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
				(4) 1070		(0) 0070	%	%
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations		1a					
b	Dividends paid by foreign corporations	· [1b					
С	Dividend equivalent payments received with respect to section 871(m) transaction	ons	1c					
2	Interest:							
а	Mortgage		2a					
b	Paid by foreign corporations	· [2b					
С	Other		2c					
3	Industrial royalties (patents, trademarks, etc.)	· [3					
4	Motion picture or TV copyright royalties		4					
5	Other royalties (copyrights, recording, publishing, etc.)		5					
6	Real property income and natural resources royalties		6					
7	Pensions and annuities		7					
8	Social security benefits	·	8					
9	Capital gain from line 18 below	·	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0							
а	Winnings							
b		·	10c					
11	Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed		11					
12	Other (specify):							
			12					
13	Add lines 1a through 12 in columns (a) through (d)	-	13					
14	Multiply line 13 by rate of tax at top of each column		14					
15	Tax on income not effectively connected with a U.S. trade or business. Add c						-NR, line 23a 15	
	Capital Gains and Loss	es Fr	rom	Sales or Excha	inges of Proper	ty	·	
osses f exchan	nly the capital gains and from property sales or ges that are from sources he United States and not 16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date mm/d	e acquii 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).
effectiv	ely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
jains ai	nd losses on Schedule D							
Form 1								
Report	property sales or							

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-

exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

17 Add columns (f) and (g) of line 16

18

. .

17 (

SCHE	DUL	.Е	ΟΙ
(Form	1040)-N	R)

Department of the Treasury Internal Revenue Service

Other Information

OMB No. 1545-0074

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
f	ying number

Name sl	nown on Form 1040-NR				Your identifying	number	
BHAV	ISHYA KONATHAM				172-88-0	503	
Α	Of what country or countries v						
В	In what country did you claim	residence for tax purpose	s during the tax yea	r? United States			
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident)	of the United States? .		Yes	🛛 No
D	Were you ever:						
1.	A U.S. citizen?					Yes	🛛 No
2.	A green card holder (lawful pe	rmanent resident) of the Ur	ited States?			Yes	🛛 No
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rule	s that apply to you.			
Е	If you had a visa on the last of immigration status on the last of	day of the tax year, enter y day of the tax yearF1		u didn't have a visa, en			
F	Have you ever changed your v If you answered "Yes," indicat		tus) or U.S. immigra	tion status?		Yes	🛛 No
G	List all dates you entered and	left the United States durin	g 2022. See instruct	ions.			
	Note: If you're a resident of C	anada or Mexico AND cor	mmute to work in th	e United States at frequ	uent intervals,		
	check the box for Canada or	Mexico and skip to item H	<u> </u>	🗌 Canada	Mexico		
	Date entered United States	Date departed United Stat	es I	Date entered United State	es Date depa	arted United	d States
	mm/dd/yy	mm/dd/yy		mm/dd/yy	1	nm/dd/yy	
н	Give number of days (including 2020						
I.	Did you file a U.S. income tax	return for any prior year? .				X Yes	🗌 No
	If "Yes," give the latest year an	nd form number you filed:	10)40nr			
J	Are you filing a return for a true	st?				Yes	🗙 No
	If "Yes," did the trust have a U.S. person, or receive a cont	J.S. or foreign owner under ribution from a U.S. person	r the grantor trust r ?	ules, make a distribution	n or loan to a	☐ Yes	🗌 No
κ	Did you receive total compens	ation of \$250,000 or more	during the tax year?			Yes	🗙 No
	If "Yes," did you use an alterna	ative method to determine	the source of this co	mpensation?		Yes	No
L	Income Exempt From Tax-If complete (1) through (3) below				tax treaty with	a foreign	country,
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the
	(a) Cou		(b) Tax treaty article		hs (d) Am	ount of exe	empt
				claimed in prior tax ye	ars income i	n current ta	ax year
-	(e) Total. Enter this amount o		-				
	Were you subject to tax in a for					☐ Yes	No No
3.	Are you claiming treaty benefit		-				🗙 No
	If "Yes," attach a copy of the C	competent Authority detern	nination letter to you	r return.			
M	Check the applicable box if:		<i>.</i> .			e	
	This is the first year you are m with a U.S. trade or business u	under section 871(d). See ir	nstructions				🗆
2.	You have made an election in States as effectively connected						

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/24/23 PRO Schedule OI (Form 1040-NR) 2022 Form **8880**

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Credit for Qualified Retirement Savings Contributions

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

Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074
2022
Attachment
Sequence No. 54

(b) Your spouse

608.

Your social security number 172-88-0503

(a) You

608.

608.

608.

608.

26,640.

REV 03/24/23 PRO

7

1

2

3

4

5

6

8

BHAVISHYA KONATHAM



10 11 12 You cannot take this credit if either of the following applies.

• The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$34,000 (\$51,000 if head of household; \$68,000 if married filing jointly).

• The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a dependent on someone else's 2022 tax return; or (c) was a **student** (see instructions).

- Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2022. Do not include rollover contributions
 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2022 (see instructions) . . .
- 4 Certain distributions received **after** 2019 and **before** the due date (including extensions) of your 2022 tax return (see instructions). If married filing jointly, include **both** spouses' amounts in **both** columns. See instructions for an exception . . .
- 5 Subtract line 4 from line 3. If zero or less, enter -0-
- 6 In each column, enter the smaller of line 5 or \$2,000
- 7 Add the amounts on line 6. If zero, **stop**; you can't take this credit
- 8 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11* .
- 9 Enter the applicable decimal amount from the table below.

If line	8 is—	A	And your filing status is –				
Over-	But not over—	Married filing jointly Enter or	Head of household hine 9—	Single, Married filing separately, or Qualifying surviving spouse			
	\$20,500	0.5	0.5	0.5			
\$20,500	\$22,000	0.5	0.5	0.2			
\$22,000	\$30,750	0.5	0.5	0.1	9	х	.1
\$30,750	\$33,000	0.5	0.2	0.1			
\$33,000	\$34,000	0.5	0.1	0.1			
\$34,000	\$41,000	0.5	0.1	0.0			
\$41,000	\$44,000	0.2	0.1	0.0			
\$44,000	\$51,000	0.1	0.1	0.0			
\$51,000	\$68,000	0.1	0.0	0.0			
\$68,000		0.0	0.0	0.0			
	Note:	If line 9 is zero, stop ;	you can't take this o	credit.			
ultiply line 7	by line 9 .				. 10		61.
nitation bas	ed on tax liabil	lity. Enter the amount	from the Credit Lim	it Worksheet in the instruction	ns 11	1	,436.
-		-		maller of line 10 or line 11 h			
d on Sched	ule 3 (Form 10	40), line 4			· 12		61.

* See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.

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

Form **8880** (2022)