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

IIILEIIIAI F	levertue dei vice					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social secur	ity numl	oer		
NITH	HIN REDDY KOTTA	772-37	-370	1		
Spouse's		Spouse's so	cial sec	urity nu	mber	
Part	, , ,	year you a	are au	thoriz	ing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1	I	0.0	4
	Adjusted gross income		1			$\frac{114.}{226}$
	Total tax		2			036.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			956.
	Amount you want refunded to you		5		6,	920.
Part		een a cor		our r	eturr	<u>,, , , , , , , , , , , , , , , , , , ,</u>
,	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended					
to send for any Agent to payment authoriz payment busines taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected provided in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U is initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induit of 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 at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisit days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the paid identification number (PIN) below is my signature for the income tax return (original or amended) I as a fundamental withdrawal Caracter.	ection of the tale. Treasury a cated in the tale to debit the tale the authorize the authorizes must be processing cayment. I full	ransmistand its cax prepare entry ation. The receipt of the electric ther acceipt on the receipt of the electric ther acceipt on the electric than	ssion, (designation to this a forevolved no ectronics)	b) the ated Find softwale (cauche (cauche) account (cauche) ater a	reason nancial vare for nt. This ncel) a than 2 nent of hat the
	nic Funds Withdrawal Consent.				_	
	yer's PIN: check one box only	7	3 ,	7 0	1	
X	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	r Er		digits, b	out	as my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zer	os	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Your si	gnature ▶ Date ▶ _					
Snous	e's PIN: check one box only					
Opous	I authorize to enter or generate	my DINI				as my
	ERO firm name		ter five	digits, b		as my
	signature on the income tax return (original or amended) I am now authorizing.			r all zer		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.		_			_
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	8 9 5	2 3	1 9	8	9
		Don't en	ter all ze			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this ret	urn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	Oo So				

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

2022

OMB No. 1545-0074

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

For the year Jar	n. 1–D	ec. 31, 2022, or other tax year begin	ining		, 2022,	ending		,	20		See separate nstructions.
Filing Status		Single	, ,	•	•	ng surviving sp		,		tate	☐ Trust
Check only one box.		you checked the QSS box, enter the c		. , ,			•				
Your first name	and i	middle initial	Last na	ame					Your id (see ins	-	ing number ons)
NITHIN RE	EDDY	,	KOTT	A					772-	37-3	3701
Home address	(numl	per and street). If you have a P.O. bo	x, see ins	tructions.							Apt. no.
8645 N MA	CAR	THUR BLVD					206	6			
City, town, or p	ost of	ffice. If you have a foreign address, a	also comp	lete spaces belo	w.			State		ZIP c	ode
IRVING								TX		750	63
Foreign country	/ nam	e	Foreigi	n province/state/	county			Foreign p	oostal co	de	
Digital Assets		ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or a							r (b) sell,		nge, gift, or Yes 🔀 No
Dependents	;			(0) 5				(4) Che	eck the box	i	lifies for (see inst.):
(see instructions)	:	(1) First name Last name	e	(2) Depender identifying nur		(3) Relationsh	ip to voi	Chile	d tax cred	ax credit Credit for oth dependents	
		(7)		, ,		(0)	,			+	
If more than four	1								Ħ		
dependents, see instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see i	nstructions) .					. 1a		104,181.
Effectively	b	Household employee wages not re	ported or	Form(s) W-2 .					. 1b		
Connected	С	Tip income not reported on line 1a	(see instr	uctions)					. 1c		
With U.S.	d	Medicaid waiver payments not rep	orted on F	Form(s) W-2 (see	instruct	ions)			. 1d		
Trade or	е	Taxable dependent care benefits for	om Form	2441, line 26 .					. 1e		
Business	f	Employer-provided adoption bene-	fits from F	orm 8839, line 2	9.				. 1f		
	g	Wages from Form 8919, line 6 .							. 1g		
Attach Form(s) W-2,	h	Other earned income (see instructi	ons) .						. 1h		
1042-S,	i	Reserved for future use				<u>1i</u>					
SSA-1042-S, RRB-1042-S.	j	Reserved for future use									
and 8288-A	k	Total income exempt by a treaty from	om Sched	lule OI (Form 104	0-NR), it	em L,					
here. Also		line 1(e)				1k					
attach Form(s)	Z	Add lines 1a through 1h							. 1z		104,181.
1099-R if	2a	. –	2a			able interest .					
tax was	3a		За	2.		inary dividend			. 3b		2.
withheld.	4a		la l			able amount .					
If you did not get a Form	5a		5a			able amount .					
W-2, see	6	Reserved for future use						_			
instructions.	7	Capital gain or (loss). Attach School	•			•					-62.
	8 9	Other income from Schedule 1 (Fo Add lines 1z, 2b, 3b, 4b, 5b, 7, and	-								<u>-12,007.</u>
	10	Add lifles 12, 25, 35, 45, 35, 7, and Adjustments to income:	10. 11115 15	s your total ellec	uvely Co		onie .		. 9		92,114.
	а	From Schedule 1 (Form 1040), line	26			10a					
	b	Reserved for future use									
	c	Reserved for future use									
	d	Enter the amount from line 10a. Th							. 10d		
	11	Subtract line 10d from line 9. This		=							92,114.
	12	Itemized deductions (from Sched deduction (see instructions)	lule A (Fo	rm 1040-NR)) or	, for cert	tain residents	of India		rd		
	13a	Qualified business income deducti				1	. on pour l	_,			12,950.
	b	Exemptions for estates and trusts									
	C	Add lines 13a and 13b					_		. 130		
	14								<u> </u>		12,950.
	15	Subtract line 14 from line 11. If zero									79,164.

Tax and	16	Tax (see instructions). Check if any from For	rm(s): 1 🗌 88	2 2 4 97	2 3 \square		16	13,036.
Credits	17	Amount from Schedule 2 (Form 1040), line	3			1	17	0.
	18	Add lines 16 and 17				1	18	13,036.
	19	Child tax credit or credit for other depende	ents from Schedu	ule 8812 (Form 10-	40)	1	19	
	20	Amount from Schedule 3 (Form 1040), line	8			2	20	
	21	Add lines 19 and 20				2	21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0			2	22	13,036.
	23a	Tax on income not effectively connected w Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment ta line 21	,	, ,,	23b			
	С	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c				2	3d	
	24	Add lines 22 and 23d. This is your total ta	x		<u></u>	2	24	13,036.
Payments	25	Federal income tax withheld from:						
_	а	Form(s) W-2			25a 19	,956.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				2	5d	19,956.
	е	Form(s) 8805				2	5e	
	f	Form(s) 8288-A				2	5f	
	g	Form(s) 1042-S				2	5g	
	26	2022 estimated tax payments and amount	applied from 20	21 return		2	26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedule 8	8812 (Form 1040))	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	15		31			
	32	Add lines 28, 29, and 31. These are your to	otal other paym	ents and refunda	ble credits	3	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T	hese are your to	tal payments .		3	33	19,956.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33.	This is the amoun	t you overpaid	3	34	6,920.
	35a	Amount of line 34 you want refunded to y	ou. If Form 8888	is attached, chec	k here	. 🗌 🛭	5a	6,920.
Direct deposit?	b	Routing number 0 8 1 0 0 0	0 3 2	c Type:	Checking	Savings		
See instructions.	d	Account number 3 5 5 0 1 2						
	е	If you want your refund check mailed to a	n address outsid	e the United State	es not shown on	page 1,		
		enter it here.			,			
	36	Amount of line 34 you want applied to you			36			
Amount	37	Subtract line 33 from line 24. This is the ar	mount you owe.					
You Owe		For details on how to pay, go to www.irs.g				3	37	
	38	Estimated tax penalty (see instructions)			38			
Third	Do yo	u want to allow another person to discuss t	his return with th	ie IRS? See instru	ctions. \square Ye	s. Complete	below.	⊠ No
Party Designee	Designame	nee's	Phone no.			nal identificat er (PIN)	ion	
		penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration						
Sign	Your	signature	Date	Your occupation		If the IR	S sent you	an Identity
Here				•			ion <u>PIN, er</u>	ter it here
				SOFTWARE E	NGINEER	(see ins	t.)	
	Phone		Email address					
Paid	Prepa	rer's name Preparer	's signature		Date	PTIN	Check	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PR	RIYA RAM SAGAR	R GUPTA TALLAM	03/28/2023	P0208270)3 L Se	elf-employed
Use Only		name GLOBAL TAXES LLC				Phone no.		65-9522
y	Firm's	address 245 DOOMEV OT F DI	TINICMITOR NI	T 00016		Firm's FIN	24-21	71965

Form 1040-NR (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

NITHIN REDDY KOTTA

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

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

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

	Sequence No. 01
Your soc	ial security number
772_37	_3701

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	-12,007.
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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	, , , , , , , , , , , , , , , , , , ,	8m		
n	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 ()	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	a nongovernmental section 457 plan	8t		
u -	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
0	Total other income. Add lines as through a	8z		
9 10	Total other income. Add lines 8a through 8z		9	-12 007

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 governing			
	officials. Attach Form 2106	[12	1
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	
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	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
İ	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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)			
Z	Other adjustments. List type and amount:			
25			O.F.	
25 26	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 an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 of 1040-3n, lifte 10, of Form 1040-1nn, lifte 10a		20	

SCHEDULE NEC (Form 1040-NR)

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

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

Attach to Form 1040-NR.

Attach

OMB No. 1545-0074

2022

Attachment
Sequence No. 7B

Department of the Treasury Internal Revenue Service Name shown on Form 1040-NR

NITHIN REDDY KOTTA

| Sequence N | Your identifying number | 772-37-3701

Enter a	amount of income und	er the a	appropriate rate of tax. See instructions.							
			Nature of Income			(a) 10%	(b) 15%	(c) 30%		r (specify)
									%	%
1	Dividends and divide									
а	Dividends paid by U		•		1a					
b		_	corporations		1b 1c					
С	c Dividend equivalent payments received with respect to section 871(m) transactions									
2	Interest:									
а	3.3.									
b	Paid by foreign corp	oratior	ns		2b					
С					2c					
3			s, trademarks, etc.)		3					
4			ight royalties		4					
5	Other royalties (copy	rights	recording, publishing, etc.)		5					
6			natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benefits									
9	O Capital gain from line 18 below									
10	Gambling—Resident If zero or less, ente	ts of C r -0	anada only. Enter net income in column (c).							
а	Winnings									
b			<u> </u>		10c					
11	Note: Losses not all	owed	lents of countries other than Canada.		11					
12					12					
13			columns (a) through (d)		13					
14	•		tax at top of each column		14					
15			ely connected with a U.S. trade or business			through (d) of line 1	Fnter the total here	and on Form 1040.	-NR. line 23a 15	
	Tax on moonic not c	1100414	Capital Gains and						1411, 11110 200 10	
losses f	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 acq	uired	(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).
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										
(Form 1										
	property sales or ges that are effectively									
connec	ted with a U.S. business	17	Add columns (f) and (g) of line 16					17	(
	edule D (Form 1040), 797, or both.		Capital gain. Combine columns (f) and (g						r -0 18	
				-				<u> </u>		1

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Vame	shown on Form 1040-NR				Your identifying	number			
NIT	THIN REDDY KOTTA				772-37-37				
Α	Of what country or countries we	ere you a citizen or nationa	al during the tax ye	ar? INDIA					
В	In what country did you claim r	esidence for tax purposes	s during the tax yea	ar? United States					
С	Have you ever applied to be a g	green card holder (lawful p	ermanent resident)	of the United States? $\ \ .$		☐ Yes	⊠ No		
D	Were you ever:					_	_		
							⊠ No		
2	A green card holder (lawful perr					∐ Yes	⊠ No		
_	If you answer "Yes" to (1) or (2),		•						
E	If you had a visa on the last do immigration status on the last do	ay of the tax year. <u>F1</u>					_		
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?								
G	List all dates you entered and le	eft the United States during	g 2022. See instruc	ctions.					
	Note: If you're a resident of Ca check the box for Canada or I	anada or Mexico AND con Mexico and skip to item H	nmute to work in th	he United States at frequ Canada	ent intervals,				
	Date entered United States	Date departed United State	es	Date entered United State		rted United	States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy			
			_ _						
			—						
Н	Give number of days (including v	, 2021	, and	2022 365					
I	Did you file a U.S. income tax re If "Yes," give the latest year and					X Yes	□No		
J	Are you filing a return for a trust	t?				Yes	⊠ No		
	If "Yes," did the trust have a UU.S. person, or receive a contril					☐ Yes	☐ No		
K	Did you receive total compensa					Yes	⊠ No		
	If "Yes," did you use an alternat	tive method to determine t	he source of this c	ompensation?		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, the amount of exempt income in the				claimed the tre	aty benefit	, and the		
	(a) Coun		(b) Tax treaty artic	le (c) Number of month		ount of exe			
				claimed in prior tax ye	ars Income II	n current ta	x year		
	(e) Total. Enter this amount on		-						
	. Were you subject to tax in a for					☐ Yes	☐ No		
3	Are you claiming treaty benefits		-			Yes	⊠ No		
	If "Yes," attach a copy of the Co	ompetent Authority detern	nination letter to yo	ur return.					
M .	Check the applicable box if:				10.				
	 This is the first year you are ma with a U.S. trade or business ur 	nder section 871(d). See in	structions						
2	 You have made an election in States as effectively connected 								

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 Your social security number 772-37-3701 NITHIN REDDY KOTTA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked -62. 1,645. 0. 1,583. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -62. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -62. • 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 62.) 21 • (\$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 gualified 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.

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
NITHIN REDDY KOTTA	772-37-3701
Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B of	or substitute statement(s) from your broker. A substitute

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

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

(C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.) disposed (Mo., day,		(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions (g) Amount of adjustment		from column (d) and combine the result with column (g).	
Robinhood Securities LLC	05/17/22	12/31/22	1,583.	1,645.	W	0.	-62.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (in the column)).	al here and inc is checked), lir	lude on your ne 2 (if Box B	1,583.	1,645.		0.	-62.	

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.

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.

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

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

NITH	IIN REDDY KOT	'TA				772-	-37-3701	
Part	Note: If you a	r Loss From Rental Real Estate an are in the business of renting personal proper or loss from Form 4835 on page 2, line 40.			instructions. If yo	u are an ir	ndividual, rep	oort farm
		payments in 2022 that would require you						es 🛛 No
ВІ	f "Yes," did you or	will you file required Form(s) 1099? .					🗌 Ye	es 🗌 No
1a		s of each property (street, city, state, ZI						
Α	H NO:17-177	/1/E,FLATNO:104 SRINAGAR CO	OLONY SI	DDTPET.	TELANGANA T	N 5021	03	
В	11.110 17 1777	71711111111111111111111111111111111111	010111 01			1, 3021		
C								
1b	Type of Property (from list below)	above, report the number of fair	rental and		Fair Rental Days		onal Use Days	QJV
Α	3	personal use days. Check the Q		/ A	365		0	
В		if you meet the requirements to a qualified joint venture. See instru		В				
С		quaimed joint venture. See institu	actions.	С				
1	of Property: Single Family Resid Multi-Family Resid			Land Royalties	7 Self-Renta 8 Other (de:	scribe)		
					Prope			
Incon				A		В		С
3			-	.7	16.			
4		d	4					
Exper 5			5					
6		see instructions)	6					
7		intenance	7	1,5	27			
8			8	1,3	37.			
9			9					
10		orofessional fees	10					
11		S	11	1,3	0.1			
12		t paid to banks, etc. (see instructions)	12	1,3	01.			
13			13					
14			14	3,0	44.			
15			15	3,2				
16			16	- ,				
17			17	3,5	59.			
18		ense or depletion	18					
19			19					
20	Total expenses. A	Add lines 5 through 19	20	12,7	23.			
21	result is a (loss), s	from line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must	1 1	-12,0	07.			
22		real estate loss after limitation, if any, ee instructions)	22 (-12,00	7.)()()
23a	Total of all amoun	nts reported on line 3 for all rental prope	erties .		23a	716		
b	Total of all amoun	nts reported on line 4 for all royalty prop	erties .		23b			
С	Total of all amoun	nts reported on line 12 for all properties			23c			
d	Total of all amoun	nts reported on line 18 for all properties			23d			
е	Total of all amoun	nts reported on line 20 for all properties			23e	12,723		
24	•	sitive amounts shown on line 21. Do no		-		2	4	
25	Losses. Add royal	alty losses from line 21 and rental real esta	te losses fro	om line 22. E	nter total losses	here 2	5 (12,007.
26	here. If Parts II, I	lestate and royalty income or (loss). III, IV, and line 40 on page 2 do not in 1040), line 5. Otherwise, include this a	apply to y	ou, also er	iter this amoun	t on	6	-12,007.

Internal Revenue Service

Health Savings Accounts (HSAs)

Attach to Form 1040, 1040-SR, or 1040-NR. Department of the Treasury Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074

Attachment Sequence No. **52**

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

NITHIN REDDY KOTTA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 772-37-3701

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.					
Part	Part I HSA Contributions and Deduction. 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 (HDHP) during 2022. See instructions		X Se	elf-only \square 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		9 813.			
10	Qualified HSA funding distributions				
11	Add lines 9 and 10		11	813.	
12	Subtract line 11 from line 8. If zero or less, enter -0		12	2,837.	
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form		13	0.	
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See in	•			
Part	Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.				
14a	Total distributions you received in 2022 from all HSAs (see instructions)		14a		
b			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				
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. 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 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 or	Schedule 2 (Form	01		