<b>1040</b>		rtment of the Treasury-Internal Revenue Servi <b>5. Individual Income Tax</b>		urn	202	2	OMB No. 1545	-0074	IRS Use Only-	–Do not w	rite or staple	in this space.		
Filing Status Check only one box.	lf yo	Single $\mathbf{X}$ Married filing jointly $\mathbf{D}$ u checked the MFS box, enter the na on is a child but not your dependent	ame of y	0	eparately (I se. If you c	,			. , .	spou	lifying surv use (QSS) name if th	0		
Your first name and middle initial Last				ast name Y								Your social security number		
DEEPANSHU				AGARWAL						***-;	**-731	б		
If joint return, sp	ouse's	first name and middle initial	Last nar	Last name						Spouse'	s social sec	curity number		
DEEPIKA G				GUPTA						***_;	*-**-1904			
Home address (	instructio	structions.					Apt. no. Pres		Presidential Election Campaign					
1629 HUNTER DR									A A		nere if you,			
City, town, or post office. If you have a foreign address, also com				nplete spaces below. State Z					ode			tly, want \$3		
WHEELING				IL					90		o go to this fund. Checking a box below will not change			
Foreign country name								Foreig			our tax or refund.			
											You	Spouse		
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward.	award, or	pavr	nent for prope	rtv or	services): or	(b) sell.				
Assets		ange, gift, or otherwise dispose of a									Yes	X No		
Standard		eone can claim: 🗌 You as a de	-				a dependent							
Deduction		pouse itemizes on a separate return												
A se a /Dilius alus asses		·	_							1050		la al		
		Were born before January 2, 1	928	Are blir		ouse			ore January 2	, 				
Dependents					cial security	/	(3) Relationsh to you	ip (4	Check the bo	1				
If more		rst name Last name				-			Child tax cr	alit	Credit for oti	her dependents		
than four dependents,		IKA AGARWAL			**-854		Daughter		×		l			
see instructions	AYR	A AGARWAL		***-	**-115	4	Son		<b>X</b>		[			
and check											[			
here 🗌		T		· · ·										
Income	1a	Total amount from Form(s) W-2, be				• •	• • • •	с ·	· · · ·	1a 1b		31,2 <u>25</u> .		
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2												
W-2 here. Also	c	Tip income not reported on line 1a				· ·		• •		10				
attach Forms	d	Medicaid waiver payments not rep				nstru	ictions)	• •		1d				
W-2G and 1099-R if tax	e	Taxable dependent care benefits f					• • •	•		1e				
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	39, line 29	• •		•		1f				
If you did not	g	Wages from Form 8919, line 6 .								1g		0		
get a Form W-2, see	h	Other earned income (see instructi			• • •	• •	· · · ·	· ·		1h		0.		
instructions.	1	Nontaxable combat pay election (s	ee Instr	uctions)		• •	<u>1</u> i				0.1	01 00E		
		Add lines 1a through 1h			···	 ь т	· · · ·			1z		31,225.		
Attach Sch. B if required.	2a		2a				axable interes		· · · ·	2b				
	3a		3a				ordinary divide			3b				
	4a			-			axable amoun axable amoun			4b				
Standard Deduction for—	5a		5a							5b				
Single or	6a		Sa	nothod o	haak hara		axable amoun	ι	· · · ·	6b				
Married filing separately,	с 7	If you elect to use the lump-sum el Capital gain or (loss). Attach Scheo						• •	· · · L	7				
\$12,950							, check here	с ·	· · · -	-	-	11 0/15		
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, line 10						• •		8		<u>1,945.</u>		
Qualifying spouse,	9 10	9         Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income         . <th.< th="">         .           <th< td=""><td>10</td><td></td><td>19,280.</td></th<></th.<>							10		19,280.			
\$25,900						 mo		• •		11		0 200		
<ul> <li>Head of household,</li> </ul>	<u>11</u> 12	_										<u>19,280.</u>		
\$19,400	12											25,900.		
<ul> <li>If you checked any box under</li> </ul>	13			-0111 89	S OF FORM	099	<u>з-</u> н	<u>n</u> -		13	1			
Standard Deduction,	14	Add lines 12 and 13	••••	· ·	 ) This is :	· ·	ovoble incom			14		<u>25,900.</u>		
see instructions.	15	Subtract line 14 from line 11. If zer	U UI IESS	s, enter -t	mis is )					15		93,380.		

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

Form 1040 (2022)

Form 1040 (2022	2)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1	16	34,082.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	34,082.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	4,000.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	4,000.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	30,082.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	19.
	24	Add lines 22 and 23. This is your total tax	24	30,101.
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	32,238.
If you have a qualifying child,	26	2022 estimated tax payments and amount applied from 2021 return	26	
	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	1	
	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	32,238.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,137.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	2,137.
Direct deposit?	b	Routing number * * * * * * X X X X X C Type: Checking Savings		
See instructions.	d	Account number * * * * * * * * * * * * * * * * * * X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		
You Owe	10010	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee		structions	elow.	X No
·		signee's Phone Personal identif	ication I	
	na			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here				
	YO			nt you an Identity N, enter it here
Joint return? See instructions.		SOFTWARE (see i		
	Sp		IRS sen	nt your spouse an
Keep a copy for your records.				ection PIN, enter it here
your records.		TEST ANALYST (see i	nst.)	
		one no. (773) 931-7452 Email address DEEPANSHU.0311@GMAIL.COM		
Paid Preparer Use Only		eparer's name Preparer's signature Date PTIN		Check if:
	SYAM	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/03/2023 *****2		Self-employed
	Fir		ne no. (	678)965-9522
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'	's EIN	**-**5487
Go to www.irs.go	ov/Form	n1040 for instructions and the latest information. BAA REV 01/28/23 PRO		Form 1040 (2022)

irs.gov/Form1040 for instructions and t