1040		rtment of the Treasury—Internal Revenue Servi S. Individual Income Tax		ı rn	202	2	OMB No. 1545	-0074	IRS Use	Only—	Do not w	rite or staple	in this space.	
Check only		Single Arried filing jointly	_	0	eparately (N	,			,	, L	spou	ifying surv ise (QSS)	•	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spous	se. If you cl	neck	ed the HOH or	QSS	box, ente	er the	child's	name if th	ne qualifying	
Your first name	and mi	ddle initial	Last nam	ne							Your so	cial securit	ty number	
SANGAVI GUNU				JKUNTLA							***-**-5760			
If joint return, spouse's first name and middle initial Last name									\$	Spouse's social security number				
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ns.				A	Apt. no.	1	Presider	ntial Election	on Campaigr	
777 LAKE CAROLYN PKWY												Check here if you, or your		
City, town, or po	aces belo	elow. State								tly, want \$3 Checking a				
IRVING				TX				750	39			ow will not		
Foreign country name F				oreign province/state/county				Foreign postal code yo			your tax or refund.			
Digital		y time during 2022, did you: (a) rece											_	
Assets		ange, gift, or otherwise dispose of a			a financial i	ntere	est in a digital	asset)	? (See in	struc	tions.)	Yes	X No	
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur					a dependent							
Age/Blindness	You:	Were born before January 2, 1	958	Are blin	nd Spo	ouse	Was bor	n befo	ore Janua	ary 2,	1958	Is bl	ind	
Dependents	(see	instructions):			cial security		(3) Relationsh	ip (4) Check th	ne box	if qualif	ies for (see	instructions):	
If more	(1) Fi	rst name Last name		number			to you		Child tax cre		dit	Credit for ot	her dependents	
than four dependents,												l		
see instructions														
and check								·	L			[
here									L					
Income	1a	Total amount from Form(s) W-2, be Household employee wages not re					• • • •	<u>n</u> .	• •		1a 1b)2 <mark>,</mark> 729.	
Attach Form(s)	b	Tip income not reported on line 1a			· · · · · ·			• •	• •	• •	10			
W-2 here. Also	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							• •	• •	1d			
attach Forms W-2G and	e	Taxable dependent care benefits from Form 2441, line 26									1e			
1099-R if tax	f	Employer-provided adoption bene									1f			
was withheld.	g	Wages from Form 8919, line 6 .									1g			
If you did not get a Form	h	Other earned income (see instructi									1h		0.	
W-2, see	i	Nontaxable combat pay election (see instructions)												
instructions.	z	Add lines 1a through 1h		×.,							1z	10	02,729.	
Attach Sch. B	2a		2a			b Ta	axable interest				2b			
if required.	3a		3a				rdinary divide				3b			
	4a	IRA distributions	4a			b Ta	axable amoun	t			4b			
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amoun	t			5b			
	6a	Social security benefits	6a			b Ta	axable amoun	t			6b			
Single or Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)												
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here												
Married filing	8	Other income from Schedule 1, line 10								8	-	9,569.		
jointly or Qualifying	ly or Add lines to Ob Ch the Eh Ch Z and Q. This is your total income								9		93,160.			
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, lir	ne 26							10			
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income									11	(93,160.	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)									12		12,950.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A									13			
any box under Standard	14	Add lines 12 and 13									14		12,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	, enter -0) This is y	our t	axable incom	е.	· ·		15	8	30,210.	

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

Form 1040 (2022)

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16	13,267.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	13,267.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19		
	20	Amount from Schedule 3, line 8	20		
	21	Add lines 19 and 20	21		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	13,267.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.	
	24	Add lines 22 and 23. This is your total tax	24	13,267.	
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	15,618.	
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26		
qualifying child,	27	Earned income credit (EIC)	D		
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	15,618.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,351.	
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	2,351.	
Direct deposit? See instructions.	b	Routing number * * * 1 8 2 5 c Type: Checking Savings			
See instructions.	d	Account number * * * * 7 2 4 9			
	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 amount you owe .			
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37		
	38	Estimated tax penalty (see instructions)			
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions		× No	
Designee		signee's Phone Personal identif			
	nar				
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to			
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
	Yo			nt you an Identity IN, enter it here	
Joint return?		SOFTWARE DEVELOPER (see			
See instructions.	Sp		IRS ser	nt your spouse an	
Keep a copy for		Ident	Identity Protection PIN, enter it here		
your records.		(see i	nst.)		
		one no. (941)916-0201 Email address SANGAVI.SRIKANTH96@GMAIL.COM	,		
Paid		parer's name Preparer's signature Date PTIN		Check if:	
Preparer	-	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/21/2023 *****2		Self-employed	
Use Only				678)965-9522	
			s EIN	**-**5487	
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 01/14/23 PRO		Form 1040 (2022)	

rs.gov/Form1040 for instructions and the