1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 2	022	OMB No. 1	545-0074	IRS Use Only-	-Do not w	rite or staple ir	this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the na son is a child but not your dependent	ame of y						spou	lifying survi use (QSS) name if the	Ũ
Your first name and middle initial				ne		Your social security number					
GOUTHAM			CHOL	AVETI					***-**-0081		
lf joint return, sp	oouse's	s first name and middle initial	Last name						Spouse's social security number		
SREEVANI				BEEGALA					***_	**-5403	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			A	Apt. no.	Preside	ntial Electio	n Campaign
11025 T PLAZA								1100		here if you, o	
City, town, or p	ost offi	ce. If you have a foreign address, also co	nplete spaces below. State 2				ZIP c		spouse if filing jointly, want \$3 to go to this fund. Checking a		
Omaha							681	.37	box below will not change		
Foreign country name			Foreign province/state/county Fo			Foreig	Foreign postal code you		or refund.	_	
										You	Spouse
Digital		ny time during 2022, did you: (a) rece								—	
Assets		ange, gift, or otherwise dispose of a	-					? (See instruc	ctions.)	Yes	X No
Standard		eone can claim: 🗌 You as a de				s a depende	nt				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-	-status alie	n					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	Spous	e: 🗌 Was	born befo	ore January 2,	1958	🗌 Is blir	nd
Dependents	(see	instructions):		(2) Social	security	(3) Relatio	nship (4) Check the bo	x if quali	fies for (see i	nstructions):
If more		irst name Last name		num		to yo		Child tax cre	edit	Credit for othe	er dependents
than four	SAH	IAJ V CHOLAVETI		***_**	-5433	Son				>	٢
dependents,	SAH	IASRA G CHOLAVETI		***-**-9713 Daughter			er	X			
see instructions and check	;]
here 🗌											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions	s)				1a	10	9,741.
moonio	b	Household employee wages not reported on Form(s) W-2									
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								:	
attach Forms	d	Medicaid waiver payments not rep	n Form(s) W-2	2 (see instr	ructions) .			1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							1e		
was withheld.	f	Employer-provided adoption bene		Form 8839,	line 29				1f		
lf you did not	g	Wages from Form 8919, line 6 .			• • •				1g		
get a Form W-2, see	h	Other earned income (see instructi			• • •	· · · ·	 1i		1h		0.
instructions.	i	Nontaxable combat pay election (s									
	<u>z</u>	Add lines 1a through 1h							1z		9,741.
Attach Sch. B	2a	· · · · ·	2a			Taxable inte			2b		
if required.	<u>3a</u>		3a	· · · · · ·		Ordinary div			3b	_	
	4a		4a			Taxable amo			4b	_	
Standard Deduction for –	5a		5a			Taxable amo			5b	_	
Single or	6a		6a			Taxable amo			- 6b		
Married filing separately,	c 7	If you elect to use the lump-sum e		-	`		,	· · · L			
\$12,950	7 8	Capital gain or (loss). Attach Scher Other income from Schedule 1, lin						· · · L	8	-	1 750
Married filing jointly or	8 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							8		<u>4,750.</u> 4,991.
Qualifying surviving spouse,	9 10	Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche		-					9 10		י דעני ד
\$25,900			11		1 001						
 Head of household, 	sehold, 12 Standard deduction or itemized deductions (from Schedule A)							12		<u>4,991.</u> 5,900.	
\$19,400 • If you checked	13	Qualified business income deduction	13		5,900.						
any box under	14				. 1 0111 09				14		5,900.
Standard Deduction,	14	Add lines 12 and 13									<u>5,900.</u> 9,091.
see instructions.			0 01 1035	, ontor -0 I	ino io your				15	<u> </u>	, U 9 I .

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	6,678.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	6,678.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,500.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	2,500.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	4,178.
	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	4,178.
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	4,367.
15	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a ^L 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	F	
	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	4,367.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	189.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	189.
Direct deposit?	b	Routing number * * * 1 8 2 5 c Type: X Checking Savings		
See instructions.	d	Account number * * * * 4 1 2 6		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe	0.	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	below.	× No
Ū		signee's Phone Personal ident	ification	
	nar	ne number (PIN)		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to		
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		, ,
	Yo			nt you an Identity IN, enter it here
Joint return? See instructions.			e inst.)	
	Sp		e IRS ser	nt your spouse an
Keep a copy for	·	Iden	ntity Prote	ection PIN, enter it here
your records.		HOME MARER X	e inst.)	
		one no. (402)401-0593 Email address Goutham4you@gmail.com		1
Paid Preparer	Pre	eparer's name Preparer's signature Date PTIN		Check if:
	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/13/2023 *****	2703	Self-employed
Use Only	Firi	m's name GLOBAL TAXES LLC Pho	ne no. (678)965-9522
	Firi	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	n's EIN	**-**5487
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 01/09/23 PRO		Form 1040 (2022)

s.gov/Form1040 for instructions and t