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

2022

OMB No. 1545-0074

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

Filing Status		Single Married filing jointly	Marrie	ed filing separately (N	/IFS)	Head of	hous	sehold (HOH)			fying survi se (QSS)	ving	
Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	our spouse. If you cl	hecke	ed the HOH or	QS	S box, enter				e qualifying	
		on is a child but not your dependent		MU MACHA								. , ,	
Your first name and middle initial Last name)					Your social security number			
MOUNIKA KA				MPALLY					* *	***-**-0292			
If joint return, spouse's first name and middle initial Last name				me					Sp	Spouse's social security number			
									* *	***-**-6654			
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.				Apt. no.		Presidential Election Campaign			
765 MONTAGUE EXPY,							259		Check here if you, or your				
City, town, or post office. If you have a foreign address, also complete sp				te spaces below. State ZI			ZIP				f filing joint this fund. C		
MILPITAS	3			CA			95				w will not o		
Foreign country name			F	Foreign province/state/county			Fore	Foreign postal code you			or refund.	Ü	
							4	You Spouse					
Digital	At ar	y time during 2022, did you: (a) rec	eive (as	a reward, award, or	paym	ent for prope	rty c	r services);	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (or a financial i	ntere	st in a digital	asse	et)? (See ins	tructio	ns.)	☐ Yes	⊠ No	
Standard	Som	meone can claim: You as a dependent Your spouse as a dependent											
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien								
Age/Rlindness	. Vou	Were born before January 2, 1	958 F	Are blind Spo	use:	□ Was hor	n he	efore Januar	v 2 10	258	☐ Is blir	nd	
	_			(2) Social security		(3) Relationsh		(4) Check the					
Dependents		rst name Last name		number		to you	lip	Child tax			`	er dependents	
If more than four	(1)	Last hame						Orinia tax]		STOCKET TO TOTAL		
dependents,]				
see instructions	s ——						,]	+		-	
and check here]	+		-	
	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)						1a		6,286.	
Income	b	Household employee wages not re	•	,					Ċ	1b	<u> </u>	0,200.	
Attach Form(s)	С	Tip income not reported on line 1a								1c			
W-2 here. Also attach Forms	d	•	t reported on Form(s) W-2 (see instructions)							1d			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						1f					
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form	h	Other earned income (see instruct								1h		0.	
W-2, see instructions.	i		ay election (see instructions) 1i										
instructions.	z	Add lines 1a through 1h							1z	8	6,286.		
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	xable interest	t			2b			
if required.	3a	Qualified dividends	3a		b Or	dinary divider	nds			3b			
	4a	IRA distributions ,	4a		b Ta	xable amoun	t.			4b			
Standard	5a	Pensions and annuities	5a		b Ta	xable amoun	t.			5b			
Deduction for—	6a	Social security benefits	6a		b Ta	xable 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 Sche	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7			
Married filing	8	Other income from Schedule 1, line 10								8	-1	0,800.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	7	5,486.		
surviving spouse, \$25,900 40 Adjustments to income from Schedule 1, line 26										10			
Head of	Subtract line 10 from line 9. This is your adjusted gross income							11	7	5,486.			
household, \$19,400	12	Standard deduction or itemized	ed deductions (from Schedule A)							12	1	2,950.	
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	1	<u>2,950.</u>		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	6	2,536.	
)													

Form 1040 (2022	2)				Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3		16	9,373.	
Credits	17	Amount from Schedule 2, line 3	[17		
	18	Add lines 16 and 17	<u>L</u> .	18	9,373.	
	19	Child tax credit or credit for other dependents from Schedule 8812	🗠	19		
	20	Amount from Schedule 3, line 8	<u>L</u> :	20		
	21	Add lines 19 and 20	<u>L</u> :	21		
	22	Subtract line 21 from line 18. If zero or less, enter -0	<u>L</u> :	22	9,373.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	<u>L</u> :	23	0.	
	24	Add lines 22 and 23. This is your total tax		24	9,373.	
Payments	25	Federal income tax withheld from:				
	а	Form(s) W-2)65.			
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	2	25d	13,065.	
If you have a	26	2022 estimated tax payments and amount applied from 2021 return		26		
qualifying child, attach Sch. EIC. [27	Earned income credit (EIC)				
allach Sch. ElC.	28	Additional child tax credit from Schedule 8812		4		
	29	American opportunity credit from Form 8863, line 8				
	30	Reserved for future use				
	31	Amount from Schedule 3, line 15	7			
	32	7.134 miles 2.7, 26, 26, 4.134 6.17 miles 4.16 year total of the payments and 10.134 factors	<u> ;</u>	32		
-	33	Add lines 25d, 26, and 32. These are your total payments		33	13,065.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid		34	3,692.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here		35a	3,692.	
Direct deposit? See instructions.	b		vings			
oee mandenons.	d	Account number * * * * * * * * *				
	36	Amount of line 34 you want applied to your 2023 estimated tax				
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	[;	37		
	38	Estimated tax penalty (see instructions)				
Third Party Designee		o you want to allow another person to discuss this return with the IRS? See structions	plete bek	ow. 🔰	☑ No	
			l identifica	tion		
		me number	, ,			
Sign		ider penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, lief, they are true, correct, and complete, Declaration of preparer (other than taxpayer) is based on all information of				
Here		our signature Date Your occupation			ou an Identity	
	10	di signature			enter it here	
Joint return?		SOFTWARE ENGINEER	(see inst	t.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation			our spouse an	
your records.			(see inst	lentity Protection PIN, enter it here ee inst.)		
	Ph	one no. Email address				
Paid	Pre		TIN		neck if:	
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/17/2023 *	****27	03 [Self-employed	
Use Only	Fir	m's name GLOBAL TAXES LLC	Phone n	no. (67	8)965-9522	
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816	Firm's E	IN	**-***1965	
					1010	