1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		_{rn} 202	2	OMB No. 1545	-0074	IRS Use O	nly—D	o not wi	rite or staple ir	n this space.
Filing Status Check only	us 🛛 Single 🗌 Married filing jointly 🗌 Married filing separately (MFS) 🗌 Head of household (HOH)								Qualifying surviving spouse (QSS)			
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spouse. If you cl	neck	ed the HOH or	QSS	box, enter	the c	hild's:	name if the	e qualifying
Your first name	Your first name and middle initial Last name Yo							Your social security number				
SAIPAVAN				Saraj					1	125-35-9615		
If joint return, spouse's first name and middle initial				Last name					Spouse's social security number			
	-	er and street). If you have a P.O. box, see	instructior	ns.				vpt. no.				n Campaign
18516 NE 113TH WAY								1008		Check here if you, or your spouse if filing jointly, want \$3		
City, town, or post office. If you have a foreign address, also con									to	go to	this fund. C	Checking a
REDMOND										ow will not of or refund.	change	
Foreign country name				Foreign province/state/county								Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a					-				Yes	No
Standard		eone can claim: You as a de	-	Vour spouse			40001)	. (000 110	liuoti	01101)		
Deduction		Spouse itemizes on a separate retur	n or you \	were a dual-status	alien	l						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor		ore Januar	-		🗌 ls blii	
Dependents				(2) Social security		(3) Relationsh	ip (4	(4) Check the b		1		
If more	(1) Fi	irst name Last name		number		to you		Child tax c		t	Credit for oth	er dependents
than four dependents,]		L	<u>_</u>
see instructions	s ——]		L	<u>_</u>
and check here]		L	<u></u>
	10		av 1 (aaa	in a tru v a ti a ma)								<u> </u>
Income	1a ⊾	Total amount from Form(s) W-2, b							·	1a 1b	21	4,238.
Attach Form(s)	b c	Household employee wages not reported on Form(s) W-2						·	10			
W-2 here. Also	d		(see instructions)			• •		•	1d			
attach Forms W-2G and	e			om 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		
lf you did not get a Form	9 h	Other earned income (see instruct			•		• •		•	1h		0.
W-2, see	i	Nontaxable combat pay election (s	,	ictions)		1 i						
instructions.	z	Add lines 1a through 1h								1z	21	4,238.
Attach Sch. B	2a	-	2a		bТ	axable interest	: .			2b		
if required.	3a		3a			ordinary divider				3b		
	4a		4a			axable amoun				4b		
Standard	5a		5a		b Ta	axable amoun	t			5b		
Deduction for –	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								7	-	1,277.
Married filing	8 Other income from Schedule 1, line 10							8		1,009.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9		1,952.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10		
• Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	20	1,952.
household, \$19,400	12	Standard deduction or itemized	Juction or itemized deductions (from Schedule A)						12		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	2,950.	
Deduction, see instructions.	15	5 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	18	9,002.

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 🗌 881	4 2 4972	3		16	40,	712.
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	40,	712.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	40,	712.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21 .			23		205.
	24	Add lines 22 and 23. This is	your total tax					24	40,	917.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 43	3,738.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c	205.			
	d	Add lines 25a through 25c						25d	43,	943.
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e15			31				
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. The second	hese are your to	tal payments				33	43,	943.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	3,	026.
	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here		35a	3,	026.
Direct deposit?	b	Routing number X X X	X X X X	XX	c Type:] Checking	Savings			
See instructions.	d	Account number X X X								
	36	Amount of line 34 you want a	applied to your	2023 estimate	edtax	36				
Amount	37	Subtract line 33 from line 24. This is the amount you owe .								
You Owe		For details on how to pay, go						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party Designee	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
	ins	structions							X No	
	De nar	signee's		Phone no.			onal ident ber (PIN)	fication		
<u>.</u>			hat I have avanting				()			
Sign		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge ar belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge								
Here		Your signature Date Your occupation							nt you an Ident	0
	10		Buto			IN, enter it her				
Joint return?					TROWLEND ENGINEER II (50 ,			inst.)		
See instructions. Keep a copy for	Sp								nt your spouse	
your records.		identri (see ir						ection PIN, ent	er it nere	
	Dh	(704)704 4401		Email address			,			
		one no. (704) 794-4485 parer's name	D Preparer's signat	Email address	SAIPAVAN.NARA	ASARAJ@GMAIL.C	PTIN		Check if:	
Paid								2702	Self-emp	hoved
Preparer		AM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/14/2023 P02082								
Use Only									678)965-	
0. to				NOWICK N			Firm	i's EIN	84-317	
GO tO WWW.Irs.go	ov/Forn	11040 for instructions and the lates	st information.		BAA	REV 03/22/23 PRO			Form 10 4	+U (2022)

BAA