1040		artment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		I rn	202	2	OMB No. 1545	-0074	IRS Use Only	y—Do not v	vrite or staple	in this space.	
Filing Status		Single] Marrie	d filing sep	oarately (M	IFS)	Head of	nousel	nold (HOH)		lifying surv use (QSS)	viving	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spous	e. If you ch	necke	ed the HOH or	QSS	box, enter tl	ne child's	s name if th	e qualifying	
Your first name	and mi	ddle initial	Last nan	ne						Your so	cial securit	y number	
SUMANTH REDDY KUDU				UMULA							***-**-0609		
If joint return, spouse's first name and middle initial Last name				ne					Spouse's social security number				
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ns.				A	pt. no.	Preside	ntial Election	on Campaign	
3665 BENTON ST								8	1		Check here if you, or your		
City, town, or post office. If you have a foreign address, also complet			mplete sp	ete spaces below. State					ode		spouse if filing jointly, want \$3 to go to this fund. Checking a		
SANTA CLARA				CA 9					51		pox below will not change		
Foreign country name			F	Foreign province/state/county					n postal code	your ta	our tax or refund.		
								-			Vou You	Spouse	
Digital	At an	ny time during 2022, did you: (a) rece	eive (as a	a reward, a	award, or p	baym	nent for prope	rty or	services); oi	r (b) sell,	_		
Assets	exch	ange, gift, or otherwise dispose of a	digital a	isset (or a	financial ir	ntere	est in a digital	asset)	? (See instru	uctions.)	Ves	X No	
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur					a dependent						
		Were born before January 2, 1		Are blind			Was bor	n befo	ore January	2, 1958	🗌 ls bl	ind	
Dependents	(see	instructions):		(2) Soc	cial security		(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see	instructions):	
If more		rst name Last name		n	number		to you		Child tax o	redit	Credit for oth	ner dependents	
than four											[
dependents, see instructions											[
and check											[
here 🗌											[
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	instructio	ons)					. 1a	ı 23	36,394.	
	b	Household employee wages not re	eported c	on Form(s)	W-2	•				. 1b)		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							. 10	;			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10	1			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f								. 1e	•		
was withheld.	f	Employer-provided adoption bene	fits from	Form 883	9, line 29	•				. <u>1</u> f			
lf you did not	g	Wages from Form 8919, line 6 .			• • •					. 19	I		
get a Form W-2, see	h	Other earned income (see instruction			• • •	•	· · · ·	· ·		. 1 h	1	0.	
instructions.	i	Nontaxable combat pay election (s	see instru	uctions) .		•	1 i			_			
	<u>z</u>	Add lines 1a through 1h	···	• • •	· · ·	· -		· ·		. 1z		36,394.	
Attach Sch. B	2a		2a				axable interest			. 2b		3.	
if required.	<u>3a</u>		3a	· · · · ·			rdinary divider			. 3b		0.	
	4a		4a				axable amount			. 4b			
Standard Deduction for –	5a		5a				axable amount			. 5b			
Single or	6a		6a				axable amount		· · ·	. 6b	•		
Married filing separately,	c 7	If you elect to use the lump-sum e						• •	· · · l			2 000	
\$12,950	7	Capital gain or (loss). Attach Scher						• •	!			-3,000.	
 Married filing jointly or 	8 9	Other income from Schedule 1, lin						. <u>8</u> . 9	0.7	<u>0.</u> 33,397.			
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	· 9		. ۱ ۲ ۲ .								
\$25,900												22 207	
 Head of household, \$19 400 12 Standard deduction or itemized deductions (from Schedu 								• •		· 11		<u>33,397.</u>	
\$19,400 • If you checked	13	Qualified business income deduction					 5-А	• •		. 13		<u>L2,950.</u>	
any box under	14	Add lines 12 and 13						• •		. 14		L2,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If zer						 е		. 15		20,447.	
see instructions.			2 0. 1000	,									

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	16	50,909.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	50,909.
	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	50,909.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	328.
	24	Add lines 22 and 23. This is your total tax	24	51,237.
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	55,233.
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]	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	5,253.
	33	Add lines 25d, 26, and 32. These are your total payments	33	60,486.
Refund Direct deposit?	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	9,249.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	9,249.
	b	Routing number * * * 0 0 3 0 c Type: Checking Savings		
See instructions.	d	Account number * * * * * * 5 5 4 8		
	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	Do	you want to allow another person to discuss this return with the IRS? See		_
Designee	ins	structions	elow.	X No
	De nai	signee's Phone Personal identii ne no. Personal identii	ication	
<u>o:</u>			the hee	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete, Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo	ur signature Date Your occupation If the	IRS ser	nt you an Identity
		Prote	ection P	IN, enter it here
Joint return?		SENIOR QUANTITATIVE ENGIN ^{(See}	inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an
your records.			inst.)	ection PIN, enter it here
	Dh			
Paid Preparer Use Only		one no. (470)309-9749 Email address SUMANTH1627@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:
			2702	Self-employed
				678)965-9522
			's EIN	**-**1965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/10/23 PRO		Form 1040 (2022)

s.gov/Form1040 for instructions and t