E1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		rn 202	2	OMB No. 1545	-0074	IRS Use Only-	–Do not w	rite or staple in this space.		
Filing Status Check only one box.	If yo	Single X Married filing jointly unchecked the MFS box, enter the nation is a child but not your dependent	ame of yc	d filing separately (N our spouse. If you cl					spou	lifying surviving use (QSS) a name if the qualifying		
Your first name and middle initial Last				ast name						Your social security number		
MANOJ KUMAR REDDY G				GOPU						***-**-6813		
If joint return, spouse's first name and middle initial			Last name						Spouse'	s social security numbe		
MEGHNA MUE				JDDAPALLI					***_	**-3643		
Home address (r and street). If you have a P.O. box, see	instructior	ions.						ntial Election Campaign			
10636 SMOKY OAK TRL										here if you, or your if filing jointly, want \$3		
City, town, or post office. If you have a foreign address, also com								to to		this fund. Checking a		
ARGYLE			TX				762		box bel	ow will not change		
Foreign country name			Fo	Foreign province/state/county			Foreign postal code yo		your tax	or refund.		
										You Spouse		
Digital Assets		y time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a					- N		· · ·	Yes X No		
Standard Deduction	_	eone can claim:		Your spouse 🗌 Vour spouse were a dual-status a								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor		ore January 2		Is blind		
Dependents	(see i	instructions):		(2) Social security		(3) Relationsh	ip (4	I) Check the book	ox if quali	fies for (see instructions):		
If more	(1) Fi	rst name Last name		number		to you		Child tax cr	edit	Credit for other dependent		
than four												
dependents, see instructions												
and check							,					
here										<u> </u>		
Income	1 a	Total amount from Form(s) W-2, be		,		• • • •	• •		1a	,		
	b	Household employee wages not re	. <u>1b</u>									
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	e	Taxable dependent care benefits f			• •		• •		. 1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29	•		• •		1f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .	· · ·		• •		• •		1g	-		
W-2, see	h ;	Other earned income (see instruction	· ·		• •	· · · · ·			. <u>1h</u>	0.		
instructions.	-	Nontaxable combat pay election (s Add lines 1a through 1h	ee insuu		• •				1z	217,506.		
Attach Sch. B	2a	Ŭ	2a		. т	axable interes	· ·		2b			
if required.	2a 3a	· · · · · · · · · · · · · · · · · · ·	3a	10		ordinary divide			3b			
	4a		4a			axable amoun			4b			
Standard	5a		5a			axable amoun			5b			
Deduction for-	6a		6a			axable amoun			6b			
 Single or Married filing 	c	If you elect to use the lump-sum el						· · · · ·				
separately,	7	Capital gain or (loss). Attach Scheo			`	,			7	-3,000.		
\$12,950Married filing	8	Other income from Schedule 1, line							8	-17,400.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	9	197,237.								
surviving spouse, \$25,900	10	Adjustments to income from Sche	10									
• Head of	10 Adjustments to income from Schedule 1, line 26 11 Subtract line 10 from line 9. This is your adjusted gross income						11					
household, \$19,400	hold, 12 Standard doduction or itemized doductions (from Schodule A)							12				
If you checked	13	Qualified business income deducti				5-A			13			
any box under Standard	14	Add lines 12 and 13							14	25,900.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less,	, enter -0 This is y	ourt	taxable incom	e.		15			

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	28,928.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	28,928.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	7,500.
	21	Add lines 19 and 20	21	7,500.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	21,428.
	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	21,428.
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	29,391.
15	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8	i	
	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	29,391.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	7,963.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	7,963.
Direct deposit?	b	Routing number * * * 0 0 2 5 c Type: X Checking Savings		
See instructions.	d	Account number * * * * * * * * 1 9 4 0		
	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	07	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party		you want to allow another person to discuss this return with the IRS? See		
Designee			below.	× No
	De	signee's Phone Personal identi	fication	
	nar	ne no. 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 which	• •	, ,
	Yo			nt you an Identity 'IN, enter it here
La instructions O			inst.)	
Joint return? See instructions.	Sp		IRS se	nt your spouse an
Keep a copy for	-1-	Iden	tity Prot	ection PIN, enter it here
your records.		INFORMATION TECHNOLOGY (see	inst.)	
	Ph	one no. (832)463-8586 Email address GMREDDY.GOPU005@GMAIL.COM		
Paid Preparer	Pre	eparer's name Preparer's signature Date PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/09/2023 *****:	2703	Self-employed
	Fin	n's name GLOBAL TAXES LLC Phor	ne no. (678)965-9522
Use Only	Fin	n's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	's EIN	**-***1965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/24/23 PRO		Form 1040 (2022)

rs.gov/Form1040 for instructions and t