<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		rn 20	22	OMB No. 154	5-0074	IRS Use Only	—Do not w	rite or staple	in this space.	
Filing Status	<b>X</b> S	Single  Married filing jointly	Married	l filing separately	(MFS)	) 🗌 Head o	fhouse	hold (HOH)		lifying surv use (QSS)	/iving	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		ur spouse. If you	ı check	ked the HOH of	or QSS	box, enter th	e child's	name if th	ie qualifying	
Your first name	and mi	ddle initial	Last name	e	Your social security number							
RANGA SA	I		TIRUC	RUCHIRAPALLI VASUD						***-**-6597		
If joint return, spouse's first name and middle initial Last na			Last nam	ame					Spouse's social security number			
Home address (number and street). If you have a P.O. box, see instructi				ons. Apt.							on Campaign	
6688 JOHNHICKMAN PKWY								.22	Check here if you, or your spouse if filing jointly, want \$3			
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete spa	ete spaces below. State				ode	to go to this fund. Checking a			
FRISCO			TX				750	34	box below will not change			
Foreign country name			Fo	Foreign province/state/county				n postal code	your tax	or refund.	Spouse	
Digital	At an	ny time during 2022, did you: (a) rece	eive (as a	reward, award,	or pavi	ment for prop	erty or	services): or	(b) sell.			
Assets		ange, gift, or otherwise dispose of a								Yes	X No	
Standard Deduction	Som	eone can claim:  You as a de Spouse itemizes on a separate return	pendent	Vour spo	use as	a dependent						
		Were born before January 2, 1					orn befo	ore January 2	2, 1958	Is bl	ind	
Dependents				(2) Social secu	·	(3) Relations	hip (4	) Check the bo	x if quali	fies for (see	instructions):	
If more		rst name Last name		number	,	to you		Child tax cr	redit	Credit for oth	her dependents	
than four										[		
dependents,										[		
see instructions and check	;									[		
here 🗌										[		
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	instructions) .					. 1a	11	11,274.	
	b	Household employee wages not re	eported or	n Form(s) W-2.					. 1b			
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 rep			e instru	uctions)			. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. 1e			
was withheld.	f	Employer-provided adoption bene		orm 8839, line :	29 .				. 1f			
If you did not	g	Wages from Form 8919, line 6 .			•••				. <u>1g</u>			
get a Form W-2, see	h	Other earned income (see instructi				· · · ·			. <u>1h</u>	-	0.	
instructions.	i	Nontaxable combat pay election (s	see instru	ctions)	• •	· · [1	i			1 1 1	11,274.	
	<u>z</u>	Add lines 1a through 1h		· · · · ;	 ь т	· · · ·			. 1z		1,2/4.	
Attach Sch. B if required.	2a 2a		2a	7.		axable intere			. 2b		8.	
	<u>3a</u> 4a		3a 4a	1.		Ordinary divide axable amou			. 3b . 4b		0.	
Standard	<del>ч</del> а 5а		5a			axable amou			. 5b			
Deduction for –	6a		6a			axable amou			. 6b			
<ul> <li>Single or Married filing</li> </ul>	c	If you elect to use the lump-sum elect						 Г				
separately,	7	Capital gain or (loss). Attach Sched						[	7		-698.	
<ul><li>\$12,950</li><li>Married filing</li></ul>	8	Other income from Schedule 1, line 10							. 8		11,920.	
jointly or Qualifying	or Additional to the Children of the Children of the Theorem							. 9		98,664.		
surviving spouse,	10	Adjustments to income from Sche	. 10									
Statistics         10         Adjustments to income from Schedule 1, line 26         .           Belad of         11         Subtract line 10 from line 9. This is your adjusted gross					ome				. 11	9	98,664.	
household, \$19,400	bld, 12 Standard deduction or itemized deductions (from Schedule A)						. 12		12,950.			
If you checked	hecked <b>13</b> Qualified business income deduction from Form 8995 or Form 8995-A							. 13				
any box under Standard	14	Add lines 12 and 13							. 14		12,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less,	enter -0 This is	s your	taxable inco	ne.		. 15		35,714.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814 2 4972 3	16	14,477.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	14,477.
	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	14,477.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	14,477.
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	17,692.
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	4	
	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	
	33	Add lines 25d, 26, and 32. These are your total payments	33	17,692.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,215.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,215.
Direct deposit? See instructions.	b	Routing number         *         *         *         0         0         1         7         c Type:         X Checking         Savings		
See instructions.	d	Account number * * * * * * * * * 9 5 4 5		
	36	Amount of line 34 you want applied to your 2023 estimated tax	_	
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		
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		by you want to allow another person to discuss this return with the IRS? See	I I	
Designee		structions		X No
	De nai	signee's Phone Personal ident ne no. number (PIN)	ification	
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t	o the ber	st of my knowledge and
Sign		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 th	e IRS se	nt you an Identity
			tection P e inst.)	IN, enter it here
Joint return? See instructions.		SOFIWARE ENGINEER	- /	
Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.			e inst.)	
	Ph	one no. (848)667-4511 Email address RSAI2206@GMAIL.COM		
Paid		eparer's name Preparer's signature Date PTIN		Check if:
	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/14/2023 *****	2703	Self-employed
Preparer				(678)965-9522
Use Only			n's EIN	**-**1965
Go to www.irs.go		n1040 for instructions and the latest information. BAA REV 03/02/23 PRO		Form <b>1040</b> (2022)
•				

s.gov/Form1040 for instructions and t