E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status	s 🗙 S	Single Married filing jointly	Marrie	ed filing separately (MFS)	Head of	household (H	OH)		ifying surv	iving	
Check only	If vo	y shocked the MEC have enter the	oomo of v	our analisa. If you	ahaal.	ad tha UOU a	CCC box or	ator the		ise (QSS)	o avalifyina	
one box.		ou checked the MFS box, enter the come is a child but not your depender		rour spouse. II you o	JIECK		r QSS DOX, el	iter trie	crilia s	name ii ui	e qualifying	
Your first name			Last nai	me					Your so	rial security	v number	
		idale Ilitiai							Your social security number			
			Last nai	DAGGUPATI					115-87-9086 Spouse's social security number			
ii joint letuin, s	pouses	s il st flame and middle miliai	Lastriai	ille					opouse :	s social sec	unity mumber	
Home address	(numbe	er and street). If you have a P.O. box, se	e instructio	ns			Apt. no.	_	Droeidor	tial Flectio	n Campaign	
	•	• •	001. 001.	JOHOTIS.							ntial Election Campaign here if you, or your	
2329 DIQUEDO DR City, town, or post office. If you have a foreign address, also complete sp				spaces below. State Z			ZIP code			if filing joint	tly, want \$3	
RALEIGH							27604			this fund. (ow will not	Checking a	
Foreign country name			F	Foreign province/state/c				DOX 1		or refund.	Jilaliye	
			, , , , , , , , , , , , , , , , , , ,		,	,	- orongin poota			You Spouse		
Digital	At ar	ny time during 2022, did you: (a) re	reive (as	a reward award o	r navn	nent for prope	l erty or service	es). or (h) sell			
Assets		lange, gift, or otherwise dispose of					-			X Yes	No	
Standard		eone can claim: You as a d					, ,		,			
Deduction	_	Spouse itemizes on a separate retu	•	·								
A /Diil	-	<u> </u>		_			f		1050			
Age/Blindnes	-		1958	<u> </u>	ouse:		rn before Jar			ls bli		
•		(see instructions):		(2) Social security number		(3) Relationsh to you	"P ' '	(4) Check the box if Child tax credit		•	iristi detions). ier dependents	
If more than four	(1) F	irst name Last name		Hamber		to you	Chile	tax cre	edit	Credit for oth	er dependents	
dependents,								\vdash			-	
see instruction	s							\vdash		L		
and check here $ extstyle $	1 —									<u>L</u>		
	10	Total amount from Form(s) W-2,	hov 1 (occ instructions)							1 1 2	<u></u>	
Income	1a		,	,					1a	12	4,214.	
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2						1b				
W-2 here. Also	c	Tip income not reported on line 1a (see instructions)						1c 1d				
attach Forms W-2G and	d e	Taxable dependent care benefits from Form 2441, line 26						1e				
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29						1f				
was withheld.		Wages from Form 8919, line 6										
If you did not get a Form	g h	Other earned income (see instruc							1g 1h		0.	
W-2, see	 i	Nontaxable combat pay election										
instructions.	z	Add lines 1a through 1h	(300 111311	detions)					1z	12	4,214.	
Attach Sch. B		Tax-exempt interest	2a		 b Та	axable interes	+		2b	1 2		
if required.	3a	Qualified dividends	3a	12.		rdinary divide			3b		21.	
	4a	IRA distributions	4a			axable amoun			4b			
Standard	5a	Pensions and annuities	5a			axable amoun			5b			
Deduction for—	6a	Social security benefits	6a			axable amoun			6b			
Single or	C	-		method check here				· ·	1			
separately,	separately, 7 Capital gain or (loss) Attach Schodulo D if required if not required check here							7	1 -	3,000.		
\$12,950 Married filing	8	Other income from Schedule 1, line 10						8		0,120.		
jointly or Qualifying	9		dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income					9		1,115.		
surviving spouse,	10	Adjustments to income from Schedule 1, line 26						10		_,		
\$25,900 Head of	11	Subtract line 10 from line 9. This is your adjusted gross income						11	11	1,115.		
household,	12	Standard deduction or itemized	-	-					12		2,950.	
\$19,400 If you checked	13	Qualified business income deduc				5-A			13	1	_, _,	
any box under Standard	14	Add lines 12 and 13							14	1	2,950.	
Deduction,	15	-					15		8,165.			
see instructions.	I											

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3	,082.						
⊠ No							

Tax and	16	Tax (see instructions). Check if any from F	orm(s): 1 881	4 2 7 4972	3 🗍		16	17,398.	-
Credits	17	Amount from Schedule 2, line 3					17		
	18						18	17,398.	
	19	Child tax credit or credit for other dependents from Schedule 8812					19		
	20	Amount from Schedule 3, line 8					20	1.	
	21	Add lines 19 and 20					21	1.	
	22	Subtract line 21 from line 18. If zero or le	ess, enter -0				22	17,397.	
	23	Other taxes, including self-employment	tax, from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is your total to	ах				24	17,397.	
Payments	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a 20	,479.			
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c					25d	20,479.	
If you have a	26	2022 estimated tax payments and amou					26		
qualifying child, attach Sch. EIC. [27	Earned income credit (EIC)			27				
uttacii ocii. Eio.	28	Additional child tax credit from Schedule			28				
	29	American opportunity credit from Form			29				
	30	Reserved for future use			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are					32	00 170	_
	33	Add lines 25d, 26, and 32. These are your total payments					33	20,479.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid					34	3,082.	
D:	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here					35a	3,082.	<u>. </u>
Direct deposit? See instructions.	b	Routing number X X X X X X X X X X X C Type: Checking Savings							
	d	Account number X X X X X X X X X X X X X X X X X X X							
	36	•			36				_
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		
Tou Owe	38	Estimated tax penalty (see instructions)			38		31		
Third Party		you want to allow another person to							
Designee		structions			_	omplete	below.	X No	
_ co.gcc	De	signee's	Phone		Pers	onal iden			_
	naı		no.			ber (PIN)			
Sign		der penalties of perjury, I declare that I have exa							
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						5.	
	YO	ur signature	Date	Your occupation				nt you an Identity IN, enter it here	
Joint return?				SR SOFTWARE ENGINEER			e inst.)		
See instructions.	Sp	ouse's signature. If a joint return, both must sig	n. Date	Spouse's occupati	ion			nt your spouse an	
Keep a copy for your records.							ntity Prote inst.)	ection PIN, enter it he	ere
		one no. (510) 676-6231	Email address	CKD22010CN	ANTI COM	(00)			_
	-	one no. (510) 676-6231 eparer's name Preparer's s		GKD2291@GN	Date	PTIN		Check if:	_
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRI	•	GIIPTA TAT.T.AM		P0208	2702	Self-employed	
Preparer						(678) 965-9522			
Use Only							n's EIN	84-3171965	
	1 11					1 1 111	LIIN	<u> </u>	<u>ر</u>

Form 1040 (2022)