E1040		artment of the Treasury—Internal Revenue Serv <b>5. Individual Income Ta</b>		urn d	202	2	OMB No. 1545	-0074	IRS Use O	nly—D	o not wi	rite or staple i	n this space.		
Filing Status Check only one box.	lf yo	Single X Married filing jointly [ u checked the MFS box, enter the n on is a child but not your dependen	ame of y	0		,	Head of				spou	ifying surv ise (QSS) name if th	U U		
Your first name	and mi	ddle initial	Last nar	me						Yo	our so	cial securit	y number		
SANTOSH			KRIS	KRISHNAKUMAR								801-03-9499			
				Last name								Spouse's social security number			
PAVITHRA DEVI GAN				GANESAN						6	682-48-5279				
Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ons.				A	pt. no.	Pr	resider	ntial Electio	on Campaign		
785 PEWT	ER (	CT						4	106			ere if you,			
City, town, or po	ost offic	ce. If you have a foreign address, also co	omplete sp	baces below	v.	Stat	te	ZIP c	ode				tly, want \$3 Checking a		
CHARLOTTESVILLE				VA 2					11		box below will not change				
Foreign country name			Foreign province/state/county			у	Foreign postal code yo			our tax	or refund.				
												You	Spouse		
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a	a reward,	award, or p	bayn	nent for prope	rty or	services);	or (b)	sell,				
Assets	exch	ange, gift, or otherwise dispose of a	a digital a	asset (or a	financial in	ntere	est in a digital	asset)	? (See ins	truction	ons.)	Yes	X No		
Standard	Som	eone can claim: 🗌 You as a de	pendent	□ Y	our spouse	as	a dependent								
Deduction		Spouse itemizes on a separate retur	n or you	were a du	ual-status a	alien									
Age/Blindness	You:	Were born before January 2, 1	958	Are blin	d Spo	use:	: 🗌 Was boi	m befo	ore Januar	y 2, 1	958	Is bli	ind		
Dependents	-	•		(2) So	cial security		(3) Relationsh					ies for (see	instructions):		
If more		rst name Last name			number		to you		Child tax	c credi	t	Credit for oth	ner dependents		
than four												[			
dependents,										]		[			
see instructions and check												[			
here 🗌										]		[			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ons)						1a	8	31,184.		
moomo	b	b Household employee wages not reported on 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	Form(s)	W-2 (see in	stru	ctions)				1d					
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from Fori	m 2441, lii	ne 26 .						1e				
was withheld.	f	Employer-provided adoption bene	efits from	Form 883	39, line 29						1f				
lf you did not	g	0		• • •							1g				
get a Form W-2, see	h	Other earned income (see instruct					· · · · ·	· ·			1h	_	0.		
instructions.	i	Nontaxable combat pay election (		uctions)		·	<u>1</u> i								
	<u>z</u>	Add lines 1a through 1h		• • •	· · · ·			•••		·	1z	5	31,184.		
Attach Sch. B	2a		2a				axable interes			•	2b				
if required.	<u>3a</u>		3a				rdinary divide			·	3b				
Standard Deduction for— • Single or	4a 5 a	-	4a				axable amoun			·	4b				
	5a 6a		5a							·	5b				
	6a	Social security benefits  6a  b Taxable amount     If you elect to use the lump-sum election method, check here (see instructions)								6b					
Married filing separately,	с 7				`		,	• •			7				
<ul><li>\$12,950</li><li>Married filing</li></ul>	8		apital gain or (loss). Attach Schedule D if required. If not required, check here							8					
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income											31,184.		
Qualifying spouse,	10												<u>, 101.</u>		
\$25,900 • Head of	11												31,184.		
household,	12    Standard deduction or itemized deductions (from Schedule A)							11		25,900.					
\$19,400 • If you checked									13						
any box under Standard	14								14	2	25,900.				
Deduction,	15 Subtract line 14 from line 11. If zero or less enter -0- This is your <b>taxable income</b>							15		5,284.					
see instructions.					<b>,</b>								,		

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	6,222.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	6,222.	
	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	6,222.	
	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	6,222.	
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	11,170.	
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	26		
	27	Earned income credit (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		
	33	Add lines 25d, 26, and 32. These are your total payments	33	11,170.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,948.	
neruna	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	4,948.	
Direct deposit?	b	Routing number  X  X  X  X  X  X  X  X  C Type:  C Checking  Savings			
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X			
	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 <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 Designee		you want to allow another person to discuss this return with the IRS? See			
		tructions		× No	
	De: nar	signee's Phone Personal identif ne no. Personal identif	ication		
Ciana		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the best	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 the	IRS sen	t you an Identity	
				N, enter it here	
Joint return?		ELECTRICAL ENGINEER (see	<i>'</i>		
See instructions. Keep a copy for	Sp			t your spouse an ction PIN, enter it here	
your records.		HOME MAKER (see			
	Ph	one no. (720)275-5832 Email address SANTOSHK1995@GMAIL.COM	E		
		parer's name Preparer's signature Date PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/13/2023 P02082	2703	Self-employed	
Preparer			ne no. (678)965-9522		
Use Only			's EIN	84-3171965	
Go to www irs a		n1040 for instructions and the latest information. BAA REV 03/02/23 PRO		Form <b>1040</b> (2022)	
2.5 15 mm.n3.90		DAA REV 03/02/23 PRO			

Go to www.irs.gov/Form104 information.