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

2022

OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	house	hold (HOI	H) [fying surv se (QSS)	riving		
one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	neck	ed the HOH or	QSS	box, ente	er the	•	` ,	e qualifying		
	pers	on is a child but not your dependent	:											
Your first name and middle initial Last name				st name							Your social security number			
SURESH KUMAR GC			GOUR	GOURISHETTY							***-**-2902			
If joint return, s	pouse's	first name and middle initial	Last nar	ast name						Spouse's social security number				
VEENA			GOUR	RISHETTY						***-**-6517				
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			A	Apt. no.	Р	residen	tial Election	n Campaign		
1408 BLUE CREEK LN								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 sp	lete spaces below. State			ZIP c					tly, want \$3 Checking a		
GEORGET	NWC			TX						_	w will not	•		
Foreign country	/ name		F	Foreign province/state/county			Foreign postal code yo			your tax or refund.				
											You	Spouse		
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward, award, or p	oayr	nent for prope	rty or	services)	; or (b) sell,				
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (or a financial in	ntere	est in a digital	asset)	? (See in	struct	ions.)	Yes	⊠ No		
Standard	Som	eone can claim:	pendent	Your spouse	as	a dependent								
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status a	alien	I								
Age/Blindness	. Vou	Were born before January 2, 1	958 F	Are blind Spo	II CA	: Was bor	rn hef	ore Janua	rv 2	1058	☐ Is bli	nd		
			000 <u> </u>	(2) Social security	usc	(3) Relationsh	1.	$\overline{}$				instructions):		
Dependents		rst name Last name		number		to you	ıb ,	Child to		1		ner dependents		
If more than four		AAN GOURISHETTY		***-**-3467	7					Nount Grount for o		X		
dependents,	CLID	EYANVI GOURISHETTY		***-**-396		Son Daughter			 X			<u> </u>		
see instruction: and check	S SIII	EIANVI GOURISHEIII				Daughter	,		<u> </u>		Γ			
here	1							Г	_		Γ			
	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)						1a	22	 27,909.		
Income	b	Household employee wages not re	,	,						1b		1, 1, 2, 0, 2, 1		
Attach Form(s)	c	Tip income not reported on line 1a (see instructions)							1c					
W-2 here. Also attach Forms	d		dicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and	е	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.	g	Wages from Form 8919, line 6 .								1g				
If you did not get a Form	h	Other earned income (see instructions)								1h		0.		
W-2, see	i	Nontaxable combat pay election (s	· ·	uctions)		l 1i								
instructions.	z	Add lines 1a through 1h					. .			1z	22	27,909.		
Attach Sch. B	2a		2a		b T	axable interest	t.			2b				
if required.	3a	· ·	3a		b 0	rdinary divider	nds .			3b				
	4a	IRA distributions	4a			axable amount				4b				
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t			5b				
Deduction for —	6a	Social security benefits	6a		b T	axable amount	t			6b				
Single or Married filing	С	If you elect to use the lump-sum e	lection n	nethod, check here (see	instructions)								
separately, \$12,950	7	Capital gain or (loss). Attach Scheo	dule D if	required. If not requi	ired.	, check here				7] -	3,000.		
Married filing	8	Other income from Schedule 1, lin	e 10 .							8		34,266.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome	e				9		0,643.		
surviving spouse,	10	Adjustments to income from Sche								10				
\$25,900 Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	19	0,643.		
household, \$19,400	12									12		25,900.		
If you checked	13									13				
any box under Standard	14	4 Add lines 12 and 13								14	4 25,900.			
Deduction, see instructions.	15	5 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15		54,743.			
occ monucions.														

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	27,477.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	27,477.		
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,500.		
	20	Amount from Schedule 3, line 8	20	7,500.		
	21	Add lines 19 and 20	21	10,000.		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	17,477.		
	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	17,477.		
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	21,166.		
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26			
qualifying child,	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			
	33	Add lines 25d, 26, and 32. These are your total payments	33	21,166.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,689.		
11010111	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	3,689.		
Direct deposit?	b	Routing number * * * * * X X X X C Type: Checking Savings				
See instructions.	d	Account number * * * * * * * * * * * * * X X X X				
	36	Amount of line 34 you want applied to your 2023 estimated tax 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 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 structions	oelow.	X No		
	De	signee's Phone Personal identi	fication			
	naı	ne number (PIN)				
Sign Here	Un bel	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	the bes	st of my knowledge and er has any knowledge.		
пеге	Yo			nt you an Identity		
Joint return?		SOFTWARE ENGINEER (see	inst.)	IN, enter it here		
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here		
your records.			inst.)	CLIOIT FIN, enter it here		
		one no. (848)239-8869 Email address SK.GOURISHETTY@GMAIL.COM				
		eparer's name Preparer's signature Date PTIN		Check if:		
Paid		SSMANIKUMARAPPANA RVSSMANIKUMARAPPANA 02/03/2023 *****	0332	Self-employed		
Preparer			ne no. (646)727-7157			
Use Only			's EIN	**-***7196		