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		0, , =	_	ed filing separately (N	,	_		ehold (HOH)	spo	alifying s use (QS	S)			
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you ch		ed the HOH or	r QSS	box, enter th	e child's	s name i	the qualifying			
Your first name	and mi	ddle initial	Last nar						Your social security number					
RAVIKIRA	RAVIKIRAN				ABAVATH						***-**-4269			
		first name and middle initial		Last name						Spouse's social security number				
						***-**-5310								
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.				Apt. no.	Preside	Presidential Election Campaign				
10200 TN	IDE:PE	ENDENCE PKWY						2001	Check here if you, or your					
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP d		spouse if filing jointly, want \$3					
PLANO				TX			750	025		o go to this fund. Checking a				
Foreign country name			F	Foreign province/state/county				gn postal code		r tax or refund.				
										You	u Spouse			
Digital	At an	y time during 2022, did you: (a) rece	eive (as a	a reward, award, or i	navn	nent for prope	rty or	services); or	(b) sell.					
Assets		ange, gift, or otherwise dispose of a	,				-		1	∏Ye	s 🛛 No			
Standard		eone can claim: You as a de												
Deduction	_	Spouse itemizes on a separate return	'											
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use	Was bor		ore January 2			blind			
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check the bo	ox if qual	ifies for (s	see instructions):			
If more	(1) Fi	rst name Last name		number		to you		Child tax cr	edit	Credit for	r other dependents			
than four	SWA	RAN NAYAK SABAVATH		***-**-8412	2	Son					×			
dependents, see instructions	ABH:	IRAM NAYAK SABAVATH		***-**-412	7	Son		X						
and check	, 						>							
here														
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)	7				. 1a	1	86,962.			
	b	Household employee wages not reported on Form(s) W-2)				
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)												
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								i				
W-2G and	е													
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29												
If you did not	g	Wages from Form 8919, line 6								3				
get a Form	h	Other earned income (see instructions)								1	0.			
W-2, see	i	Nontaxable combat pay election (see instructions)												
instructions.	z	Add lines 1a through 1h					ī		. 12	2	86,962.			
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t.		. 2k)				
if required.	3a	Qualified dividends	3a		b 0	rdinary divider	nds .		. 3k)				
	4a	IRA distributions	4a		b Ta	axable amoun	t		. 4k	,				
Standard	5a		5а		b Ta	axable amoun			. 5k	,				
Deduction for—	6a		6a			axable amoun			. 6k					
Single or Married filing	С	If you elect to use the lump-sum e						[
separately,	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									-1,500.			
\$12,950 Married filing	8	Other income from Schedule 1, line 10							. 8		-8,895.			
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									76,567.			
Qualifying surviving spouse,	10	Adjustments to income from Schedule 1, line 26)				
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								, 	76,567.			
household,	12	Standard deduction or itemized deductions (from Schedule A)								2	12,950.			
\$19,400 If you checked	13									3				
any box under	14										12 050			
Standard Deduction,										<u> </u>	12,950.			
see instructions.	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									5	63,617.			

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	9,615.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	9,615.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,500.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	2,500.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	7,115.
	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	7,115.
Payments	25	Federal income tax withheld from:		
,	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)	7	
	d	Add lines 25a through 25c	25d	7,561.
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	7	
	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	7,561.
Defined	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	446.
Refund	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	446.
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		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
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	Do	you want to allow another person to discuss this return with the IRS? See		
Designee		structions	below.	X No
		signee's Phone Personal ident	fication	
	na			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		
Here	Υo	ur signature Date Your occupation If the	e IRS se	nt you an Identity
		Prot	ection P	IN, enter it here
Joint return?		SOFTWAKE ENGINEER	inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an
your records.			inst.)	ection PIN, enter it here
		one no. (732)524-8595 Email address RAVIKIRAN1913@GMAIL.COM		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/08/2023 *****	2702	Self-employed
Preparer				(678)965-9522
Use Only			ı's EIN	**-***1965
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