## E1040 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 Check only	_	0 _ 0, , =	_	d filing separately (I	,	Head of		,	spou	ifying surv	J	
one box.		u checked the MFS box, enter the none is a child but not your dependent		ourspouse.n you d INASH KUMAR MUM		ea trie non or	QSS DOX	enter tr	ie crilia s	name ii tri	e qualifying	
Your first name			Last nar							Your social security number		
				LURIPATI					454-45-6231			
	pouse's	first name and middle initial	Last nar						Spouse's social security number			
								624-69-9372				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. r	10.			n Campaign	
		MARIE WAY								ere if you,		
		ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	e	ZIP code				tly, want \$3	
FREDERICK				MD			21703			this fund. ( ow will not		
Foreign country name			Foreign province/state/county			/				your tax or refund.		
						~				You	Spouse	
Digital	At an	ny time during 2022, did you: (a) rec	eive (as a	a reward, award, or	paym	nent for prope	rty or serv	ices); or	(b) sell,		_	
Assets	exch	ange, gift, or otherwise dispose of a	a digital a	asset (or a financial	intere	st in a digital	asset)? (S	ee instru	ictions.)	Yes	⊠ No	
Standard	Som	eone can claim:	pendent	☐ Your spous	e as a	a dependent		47				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	☐ Was bor	n before	anuary 2	2, 1958	☐ Is bli	nd	
Dependents	s (see	instructions):		(2) Social security	y	(3) Relationsh	ip (4) Ch	eck the b	ox if qualif	ies for (see i	instructions):	
If more		rst name Last name		number		to you	C	Child tax c		Credit for oth	er dependents	
than four												
dependents, see instruction:												
and check												
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					. 1a	13	7,821.	
	b	Household employee wages not reported on Form(s) W-2							. 1b	l		
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. 1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29					. 1f			
If you did not	g	Wages from Form 8919, line 6 .							. 1g			
get a Form W-2, see	h	Other earned income (see instruct					7		. 1h		0.	
instructions.	i	Nontaxable combat pay election (s	see instri	uctions)		<u>1i</u>						
	Z	Add lines 1a through 1h							. 1z		7,821.	
Attach Sch. B	2a	The second secon	2a			axable interest			. 2b			
if required.	<u>3a</u>		3a			rdinary divider			. 3b	1		
	4a	The state of the s	4a			axable amoun					_	
Standard Deduction for—	5a		5a			axable amoun					_	
Single or	6a		6a			axable amoun		_	. 6b		_	
Married filing separately,	C	If you elect to use the lump-sum e		· · · · · · · · · · · · · · · · · · ·	,			· · L	= =			
\$12,950	7	Capital gain or (loss). Attach Sche						L	7			
Married filing jointly or	8	Other income from Schedule 1, lin							. 8		0.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							. 9 . 10		7,821.	
\$25,900	10	Adjustments to income from Schedule 1, line 26									-	
Head of household,	11	Subtract line 10 from line 9. This is					-		. 11		7,821.	
\$19,400	12	Standard deduction or itemized							. 12		2,950.	
If you checked any box under Standard Deduction,	13	Qualified business income deduction from Form 8995 or Form 8995-A										
	14	Add lines 12 and 13							. 14		2,950.	
see instructions.	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>									1 12	4,871.	

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	23,805.						
Credits	17	Amount from Schedule 2, line 3	17	·						
	18	Add lines 16 and 17	18	23,805.						
	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	23,805.						
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	115.						
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	23,920.						
Payments	25	Federal income tax withheld from:		<u> </u>						
	а	Form(s) W-2								
	b	Form(s) 1099								
	С	Other forms (see instructions)								
	d	Add lines 25a through 25c	25d	23,401.						
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								
	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 <b>total payments</b>	33	23,401.						
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34							
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a							
Direct deposit?	b	Routing number X X X X X X X X X X X X X X X X X X X								
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								
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	519.						
	38	Estimated tax penalty (see instructions)								
Third Party		you want to allow another person to discuss this return with the IRS? See								
Designee		tructions		<b>⋈</b> No						
	De	signee's Phone Personal identifine no. Personal identifine number (PIN)	cation							
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here				nt you an Identity						
	10			IN, enter it here						
Joint return?		QA ANALYST (see	nst.)							
See instructions. Keep a copy for your records.	Sp	Ident	the IRS sent your spouse an entity Protection PIN, enter it here see inst.)							
	Ph	one no. (408)660-0060 Email address YELLURIPATIL@GMAIL.COM								
	Pre	eparer's name Preparer's signature Date PTIN		Check if:						
Paid	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/26/2023 P02082	2703	Self-employed						
Preparer			none no. (678) 965-9522							
Use Only	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'		84-3171965						