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.

		Single 🔀 Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	housel	nold (HOF	H) [	_	fying survi	ving	
Check only one box.	If vo	u checked the MFS box, enter the na	ame of v	your spouse If you ch	neck	ed the HOH or	088	nox ente	r the		se (QSS) name if the	e qualifying	
one box.		on is a child but not your dependent		rour opouse. It you or	icoit		QOO	oox, onto	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Jillia 5 i	iamo ii tin	s qualitying	
Your first name			Last nar	me					Y	our soc	ial security	/ number	
										690-89-8366			
				MERUGU Last name						Spouse's social security number			
PRABANDH			BURR							170-37-9266			
		r and street). If you have a P.O. box, see					Α	pt. no.	_	Presidential Election Campaign			
683 TWIG	,	•						<b></b>			ere if you,		
		ce. If you have a foreign address, also co	mplete si	paces below.	Sta	te	ZIP co	ode 🗥				ly, want \$3	
BALLWIN		· · · · · · · · · · · · · · · · · · ·						to g			this fund. ( w will not (	Checking a	
Foreign country name			T F					~~~			or refund.	nange	
g,				g p		.,					You	Spouse	
Digital	Δt an	y time during 2022, did you: (a) rece	aiva (as	a reward award or r	าลงก	ment for prope	rty or	services)	or (h	llos (			
Assets		ange, gift, or otherwise dispose of a					-				Yes	X No	
Standard		eone can claim:  You as a de		<u>_</u>			40001)	(000 111		,			
Deduction	_	Spouse itemizes on a separate return		•			`						
Age/Blindness	You:	Were born before January 2, 1	958 _	Are blind Spo	use	: Was bor	$\overline{}$	re Janua			Is blir		
Dependents	•			(2) Social security		(3) Relationsh	ip (4	) Check th	ie box	if qualifie	es for (see i	nstructions):	
If more	<b>(1)</b> Fi	First name Last name		number		to you	Child tax o		x cred	it C	redit for oth	er dependents	
than four dependents,									ᆗ				
see instructions	s ——								ᆗ				
and check									ᆗ				
here								L					
Income	1a	Total amount from Form(s) W-2, be								1a	10	0,048.	
A441- <b>F</b> (-)	b	Household employee wages not re	•							1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•							1c			
attach Forms	d		orted 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 instructi					· ·			1h		0.	
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>					1.0	0 040	
		Add lines 1a through 1h								1z	10	0,048.	
Attach Sch. B	2a	'	2a			axable interest				2b			
if required.	3a	_	3a			ordinary divider				3b			
	4a		4a			axable amoun				4b			
Standard Deduction for—	5a		5a			axable amoun				5b			
Single or	6a		6a			axable amoun	τ		· .	6b			
Married filing separately,	c	If you elect to use the lump-sum e				,			. 님	-	4		
\$12,950	7	Capital gain or (loss). Attach Sched							. Ц	7		0.020	
Married filing jointly or	8	Other income from Schedule 1, lin								8		9,930.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	+ 9	0,118.	
Head of Subtract line 10 from line 9. This is your <b>adjusted gross income</b>									10	+	0 110		
								11		0,118.			
\$19,400	12			•	,					12	$+$ $\frac{2}{}$	5,900.	
If you checked any box under	13	Qualified business income deducti								13	+	- O O O	
Standard Deduction,	14	Add lines 12 and 13							14		5,900.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is yo	our <b>t</b>	axable incom	ie .			15	6	4,218.	

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	7,296.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	7,296.
	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	7,296.
	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	7,296.
Payments	25	Federal income tax withheld from:		•
. ayoo	а	Form(s) W-2	.	
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	12,020.
15	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a 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	7	
	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 <b>total payments</b>	33	12,020.
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	4,724.
neiuliu	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	4,724.
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: 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		
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)		
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS? See		_
Designee	ins	structions		⊠ No
		signee's Phone Personal ident no. number (PIN)	ification	
0:		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	o the ber	et of my knowledge and
Sign		tief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		
Here	Yo	ur signature Date Your occupation If the	e IRS se	nt you an Identity
		Pro		IN, enter it here
Joint return?		SOFTWAKE ENGINEER .	e inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.			inst.)	CHOILE IN THE IT HERE
	———Ph	one no. Email address		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		CATA SAI PAVAN KUMAR DUDIPALLI 02/02/2023 P0247	0833	Self-employed
Preparer				678)965-9522
Use Only			n's EIN	88-2145487
				4040