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

2022	
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OMB No. 1545-0074

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

Filing Status Check only	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	house	ehold (HOH)			ifying survi se (QSS)	ving	
one box.	If yo	u checked the MFS box, enter the r	ame of y	our spouse. If you ch	neck	ed the HOH or	QSS	box, enter	the c			e qualifying	
	pers	on is a child but not your dependen	t:										
Your first name and middle initial Last name						Yo	Your social security number						
SHASHIKANTH			MEES	ALA					75	750-17-0490			
If joint return, spouse's first name and middle initial Last name				name					Sp	Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Pr	esider	itial Electio	n Campaign	
								Check here if you, or your					
		ce. If you have a foreign address, also co	omplete s	paces below.	Stat	te	ZIP	code		spouse if filing jointly, want \$3 to go to this fund. Checking a			
TORRANCE				CA 90			90!				tnis tuna. C w will not d		
Foreign country name			F	Foreign province/state/county Fo			Forei	oreign postal code yo			or refund.	9-	
											You	Spouse	
Digital	At ar	y time during 2022, did you: (a) rec	eive (as	a reward, award, or p	oayn	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 inst	ructio	ons.)	Yes	⊠ No	
Standard	Som	eone can claim:   You as a de	ependent	Your spouse	as a	a dependent	,						
<b>Deduction</b>		Spouse itemizes on a separate retu	n or you	were a dual-status a	alien								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	: Was bor	rn bef	ore Januar	/ 2, 19	958	☐ Is blir	nd	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip (	4) Check the	box if	qualifi	es for (see i	nstructions):	
If more	<b>(1)</b> Fi	rst name Last name		number		to you		Child tax cr		t (	Credit for oth	er dependents	
than four													
dependents, see instructions	· —												
and check													
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a	9	3,885.	
A44(-)	b	Household employee wages not r			h					1b			
Attach Form(s) W-2 here. Also	С	·	e not reported on line 1a (see instructions)							1c			
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 from Form 2441, line 26							٠	1e			
was withheld.	f	Employer-provided adoption bene			٠				٠	1f			
If you did not	g	Wages from Form 8919, line 6 .			٠				٠	1g			
get a Form W-2, see	h		ner earned income (see instructions)							1h		0.	
instructions.	i	Nontaxable combat pay election (see instructions)										2 005	
	<u>z</u>	Add lines 1a through 1h	0-		L T.				•	1z	9	3,885.	
Attach Sch. B if required.	2a	·	2a 3a			axable interest rdinary divide			•	2b 3b			
	3a 4a	Qualified dividends IRA distributions	4a			axable amoun			•	4b			
Standard	<del>т</del> а 5а	Pensions and annuities	5a	,		axable amoun			•	5b			
Deduction for—	6a	Social security benefits	6a			axable amoun			•	6b			
Single or Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)							$\dot{\Box}$	OB			
separately,	7		nedule D if required. If not required, check here					$\Box$	7				
\$12,950 Married filing	8	Other income from Schedule 1, line 10							_	8	-1	0,030.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							Ċ	9		3,855.	
Qualifying surviving spouse,	10	Adjustments to income from Schedule 1, line 26								10		<del>-,</del>	
\$25,900 • Head of	11							11	Я	3,855.			
household,	ousehold, 12 Standard deduction or itemized deductions (from Schodule A)							12		2,950.			
\$19,400 If you checked	13	Qualified business income deduct		•	,	5-A				13	<u> </u>	_,,,,,,,	
any box under Standard	14	Add lines 12 and 13								14	1	2,950.	
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								15		0,905.	
see instructions.		_		,								,	

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	11,221.		
Credits	17	Amount from Schedule 2, line 3	17			
0.00.10	18	Add lines 16 and 17	18	11,221.		
	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	11,221.		
	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	11,221.		
Payments	25	Federal income tax withheld from:		,		
. ayınısınıs	а	Form(s) W-2				
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	13,423.		
If	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	7			
	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 <b>total payments</b>	33	13,423.		
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	2,202.		
nerana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2,202.		
Direct deposit?	b	Routing number X 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 36				
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			
	38	Estimated tax penalty (see instructions)				
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	helow	X No		
Designee			Il identification			
	nai					
Sign		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 whic				
Here	Yo			nt you an Identity		
Joint return?			inst.)	IN, enter it here		
See instructions. Keep a copy for your records.	Sp 	Iden		nt your spouse an ection PIN, enter it here		
		one no. (415)314-8734 Email address SHASHIKANTH8829@GMAIL.COM				
Paid		eparer's name Preparer's signature Date PTIN		Check if:		
Preparer	VENK	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI 02/17/2023 P0247		Self-employed		
Use Only	Fir		ne no. (	678)965-9522		
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	ı's EIN	88-2145487		