1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		ım 20 2	2	OMB No. 1545	-0074	IRS Use O	nly—Do n	10t writ	e or staple in this space.	
Check only		Single D Married filing jointly	_	d filing separately (N	,			, ,	s	spous	ying surviving se (QSS)	
one box.		son is a child but not your dependent		our spouse. If you c	песк		Q33	box, enter	the chi	ia s n	iame ii the qualitying	
Your first name	and mi	iddle initial	Last nan	ne					You	r soci	al security number	
VENKATA SAI PAWAN KOM				RAVOLU					01	011-21-3598		
lf joint return, s	pouse's	first name and middle initial	Last nan	ne					Spor	use's	social security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ns.			A	Apt. no.	Pres	sident	ial Election Campaigr	
610 GALE	R ST	Г					2	225			re if you, or your	
City, town, or post office. If you have a foreign address, also complete spaces below. State Z							ZIP c	ode			filing jointly, want \$3 his fund. Checking a	
SEATTLE			WA			ł	981	.09	box	belov	w will not change	
Foreign country name			F	Foreign province/state/county				oreign postal code your ta			or refund.	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a					-		. ,		Yes 🛛 No	
Standard		eone can claim: You as a de	-									
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien	1						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor	n befo	ore Januar	y 2, 195	58	Is blind	
Dependents	s (see	instructions):		(2) Social security	,	(3) Relationsh	ip (4) Check the	box if q	ualifie	es for (see instructions):	
If more than four	(1) F	irst name Last name		number		to you		Child tax o		C	redit for other dependents	
than four dependents,]	-+		
see instructions	s ——]	\rightarrow		
and check here]	+		
	1a	Total amount from Form(s) W-2, b	ov 1 (see	instructions)]	1a	140,286.	
Income	b	Household employee wages not re		,			•••			1b	140,200.	
Attach Form(s) W-2 here. Also attach Forms	c	Tip income not reported on line 1a							.	1c		
	d	Medicaid 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 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	h	Other earned income (see instruct	ions) .							1h	0.	
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)										
	z	Add lines 1a through 1h								1z	140,286.	
Attach Sch. B	2 a	Tax-exempt interest	2a		bΤ	axable interest	: .			2 b	572.	
if required.	3a		3a		b C	ordinary divider	nds .		•	3b	0.	
	4a		4a			axable amoun			•	4b		
Standard Deduction for —	5a		5a			axable amoun			•	5b		
Single or	6a	,	6a			axable amoun	t		÷	6b		
Married filing separately,	_c	If you elect to use the lump-sum election method, check here (see instructions)								_		
\$12,950	7	apital gain or (loss). Attach Schedule D if required. If not required, check here				7	12.000					
 Married filing jointly or 	8		ne from Schedule 1, line 10			· -	8	-13,060.				
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9 10	127,798.	
\$25,900		Adjustments to income from Schedule 1, line 26 . <t< td=""><td></td><td>107 700</td></t<>									107 700	
 Head of household, 	<u>11</u> 12		•				• •		•	11 12	<u>127,798.</u> 12,950.	
\$19,400 • If you checked	13	Standard deduction or itemized deductions (from Schedule A) .							•	13	12,950.	
any box under	14	Add lines 12 and 13 .								14	12,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If zer					 ie .		: F	15	114,848.	
see instructions.	-			,			•					

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)									Page
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3			16	21,399.
Credits	17	Amount from Schedule 2, lin	ne3						17	
	18	Add lines 16 and 17							18	21,399.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lin	ne8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18							22	21,399.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your total tax						24	21,399.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a	26	,427.		
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	26,427.
If you have a qualifying child,	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return				26	
	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27, 28, 29, and 31				undable	e credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments	- 				33	26,427.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you c	overpaid		34	5,028.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here		. 🗆	35a	5,028.
Direct deposit?	b	Routing number 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 a	applied to your	2023 estimate	ed tax	36	_			
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 in	nstructions) .			38				
Third Party Designee	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
	ins	tructions				[Yes. Co	mplete b	elow.	X No
		signee's		Phone				nal identif er (PIN)	ication	
	nar			no.				. ,		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here		ur signature		Date	Your occupation			1	· ·	nt you an Identity
	10	al oignataro		Duto						IN, enter it here
Joint return?					SOFTWARE ENGINEER ((see i	nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	oth must sign. Date Spouse's occupati						nt your spouse an
your records.						lden (see				ection PIN, enter it her
	Db	one no. (315)450-759	7	Email address			COM	(- /	
Paid		one no. (315)450-759 eparer's name	/ Preparer's signat		VPSK997@GI	Date		PTIN		Check if:
		PRIYA RAM SAGAR GUPTA TALLAM					7/2023	P02082	2070	Self-employed
Preparer		n's name GLOBAL TAX		TAUAG INA	GOFIA IAUUAM	03/0	1/2023			678)965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816			Firm'		· · · · · · · · · · · · · · · · · · ·
Co to warne inc		1040 for instructions and the late		TIONICK IN	D 08810		04/00 55 5			84-3171965

Go to www.irs.gov/Form1040 for instructions and the latest information.

BAA REV 02/24/23 PRO

Form **1040** (2022)