E 1040 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 one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately (Nour spouse. If you ch		_		•		spou	se (QSS)	-		
		son is a child but not your dependent							Τ.					
Your first name			Last nar							Your social security number				
SOURYA V				ADDEPALLI							816-49-5694 Spouse's social security number			
If joint return, s	pouse's	s first name and middle initial	Last nar	me					;	Spouse's	s social sec	curity number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Α	pt. no.				n Campaign		
FAIRFIE	LD KI	NOLL CT									ere if you,	,		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	e	ZIP co	ode				tly, want \$3 Checking a		
ALDIE				VA			201				w will not			
Foreign country	y name		F	Foreign province/state/county			Foreign postal code yo			your tax or refund.				
											You	Spouse		
Digital Assets		ny time during 2022, did you: (a) rec lange, gift, or otherwise dispose of a	•				-	,	`		Yes	⊠ No		
Standard		eone can claim: You as a de						V		,,,,				
Deduction Deduction	_	Spouse itemizes on a separate retur	•			а аоронаот								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn befo	re Janua	ry 2,	1958	☐ Is bli	nd		
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4) Check th	e box	if qualif	ies for (see	instructions):		
If more		irst name Last name		number	4	to you		Child ta	x cre	dit	Credit for oth	ner dependents		
than four														
dependents, see instruction											[
and check											[
here \square]										[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a	1	1,278.		
	b	Household employee wages not reported on Form(s) W-2								1b				
Attach Form(s) W-2 here. Also	С	Tip income 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								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					· ·			1h	-	0.		
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>								
	Z	Add lines 1a through 1h								1z]	1,278.		
Attach Sch. B	2a	'	2a			axable interest				2b				
if required.	3a		3a			rdinary dividei				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		,	•	,				-				
\$12,950	7	Capital gain or (loss). Attach Sche							. L	7				
Married filing jointly or	8	Other income from Schedule 1, lin		This is your tetal in a						9	1	1 270		
Qualifying surviving spouse,	9										1 -	1,278.		
\$25,900	10		-							10	-	1 070		
Head of household,	11	Subtract line 10 from line 9. This is your adjusted gross income										1,278.		
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)									-	2,950.		
If you checked any box under	13	Add lines 12 and 13									1	2 050		
Standard Deduction,	14 15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								14 15	1	.2,950. 0.		
see instructions.	.5	Castacenne 14 nom me 11. il 20	0 01 1033	5, 5/116/ 0 11115 15 y	oui t i	azabie ilicoli				13		0.		

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	0.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	0.
	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	0.
	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	0.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	761.
If you have a	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	1	
	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 total payments	33	761.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	761.
neiuliu	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	761.
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 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	ins	structions	elow.	X No
	De nai	signee's Phone Personal identifine no. Personal identifine number (PIN)	ication	
0:		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the box	at of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo	ur signature Date Your occupation If the	IRS se	nt you an Identity
		Prote	ection P	IN, enter it here
Joint return?		SOFTWARE ENGINEER (see		
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.		(see		SCHOIL FIN, enter it here
	———Ph	one no. (346)622-9452 Email address SOURYAVARMA78@GMAIL.COM		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/21/2023 P02082	2702	Self-employed
Preparer				678)965-9522
Use Only			s EIN	84-3171965
Go to warm inc =			O LIIN	Form 1040 (2022)
ao to www.iis.go	JV/1-011	n1040 for instructions and the latest information. BAA REV 03/09/23 PRO		FOIII 1040 (2022)