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.

	s 🗌 S	Single 🛛 Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	hous	ehold (HOI	H)		fying surv	iving	
Check only one box.	If vo	u checked the MFS box, enter the na	ame of v	our spouse. If you ch	neck	ed the HOH or	088	box, ente	er the	•	se (QSS) name if th	e qualifying	
one box.		on is a child but not your dependent		our opouco. Il you or	10010	04 110 11011 01	QUC	box, one)	orma o i	idino ii tii	5 quamying	
Your first name			Last nar	me					Y	our soc	ial security	number	
				NDHAM						***-**-3492			
If joint return, spouse's first name and middle initial Last nam										Spouse's social security number			
NITISHA KORAI										***-**-7792			
	(numbe	er and street). If you have a P.O. box, see						Apt. no.	-	_	-	n Campaign	
7921 397	,	•						·			ere if you,		
		ce. If you have a foreign address, also co	mplete si	paces below.	Sta	te	ZIP	code				lly, want \$3	
MARYSVII		,		·			98				to go to this fund. Checking a box below will not change		
			Foreign province/state/county			- ~			your tax or refund.				
						·			(1)		You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or	navr	nent for prope	rtv o	services)	or (b) sell.			
Assets		ange, gift, or otherwise dispose of a					-				Yes	X No	
Standard		eone can claim: You as a de								'			
Deduction		Spouse itemizes on a separate return	•										
		·											
		Were born before January 2, 1	958 _	<u> </u>	use			fore Janua			Is bli		
Dependents				(2) Social security		(3) Relationsh	ip				,	instructions):	
If more	``	rst name Last name		number		to you		Child tax c		credit Credit for		er dependents	
than four dependents,	SHAN	WIK ADVAITH GANDHAM		***-**-1112		Son		×			L		
see instruction	s ——							L	<u> </u>		<u>L</u>		
and check	, —							L	<u> </u>		<u>L</u>		
here	1	T. I						L					
Income	1a	Total amount from Form(s) W-2, be	•	,	•		•			1a	22	3,938.	
Attach Form(s)	b	Household employee wages not re	•							1b			
W-2 here. Also	С.	Tip income not reported on line 1a								1c			
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d					
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f			
If you did not	g	Wages from Form 8919, line 6 .			•		٠			1g			
get a Form W-2, see	h	Other earned income (see instruction			•	٠	i			1h		0.	
instructions.	i -	Nontaxable combat pay election (s	see instr	uctions)	•	<u>li</u>				4_	22	2 020	
	<u>z</u>	Add lines 1a through 1h			L T					1z		3,938.	
Attach Sch. B if required.	2a		2a			axable interest				2b		813.	
	3a		3a			rdinary divider axable amount				3b 4b		013.	
M	4a 5a		4a 5a			axable amount				5b			
Standard Deduction for—	6a		6a			axable amount				6b			
Single or	C	If you elect to use the lump-sum e					١.		 _	OD			
Married filing separately,	7					•	•		. Н	7		1,079.	
\$12,950 Married filing	8	Capital gain or (loss). Attach Schedule D if required. If not required, check here							. ш	8		0,735.	
jointly or	9									9		5,095.	
Qualifying surviving spouse,		Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								10	21	5,095.	
\$25,900	Adjustments to income from Schedule 1, line 20								11	21	E 00E		
Head of household, 12 Subtract line 10 from line 9. This is your adjusted gross income household, 12 Standard deduction or itemized deductions (from Schedule A)										12		<u>5,095.</u> 5,900.	
\$19,400 If you checked	12 13			`	,	 5-Δ				13		J,700.	
any box under	14	Qualified business income deduction from Form 8995 or Form 8995-A							14	1	<u> </u>		
Standard Deduction,	15								15		<u>5,900.</u> 9,195.		
see instructions.	13	Capitact line 14 HOITIME 11. II Zer	0 01 1688	5, GITTOI -U ITHS 15 Y	oui I	arabie ilicolli				15	1 18	<i>∍,</i> ⊥∀⊃.	

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	32,907.	
Credits	17	Amount from Schedule 2, line 3	17		
0.000	18	Add lines 16 and 17	18	32,907.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,000.	
	20	Amount from Schedule 3, line 8	20		
	21	Add lines 19 and 20	21	2,000.	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	30,907.	
	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	30,907.	
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	41,514.	
	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	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	41,514.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	10,607.	
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	10,607.	
Direct deposit?	b	Routing number * * * * * * 0 0 2 5 c Type: X Checking Savings			
See instructions.	d	Account number * * * * * * * * 5 1 1 4			
	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 amount 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 Designee		by you want to allow another person to discuss this return with the IRS? See structions	nelow.	X No	
Designee		signee's Phone Personal identiti		Z NO	
	nai		loation		
Sign	Un bel	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	the bes	st of my knowledge and er has any knowledge.	
Here	Yo	ur signature Date Your occupation If the	IRS se	nt you an Identity	
				IN, enter it here	
Joint return?		SOFTWARE ENGINEER	inst.)		
See instructions. Keep a copy for	Sp		ne IRS sent your spouse an ntity Protection PIN, enter it here		
your records.			inst.)	COLIDITY IIV, CITICI IL TICIC	
	——Ph	one no. (206)471-0854 Email address SAIKIRAN3839@GMAIL.COM			
		eparer's name Preparer's signature Date PTIN		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/23/2023 *****	2703	Self-employed	
Preparer				678)965-9522	
Use Only			Firm's FIN **-***1965		