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	S 🗌 S	Single X Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	hous	ehold (HOF	l)		ifying survi ise (QSS)	iving
one box.	If yo	u checked the MFS box, enter the r	name of y	our spouse. If you	checke	ed the HOH or	r QSS	box, ente	r the c	•	` ,	e qualifying
	pers	on is a child but not your dependen	t:									
Your first name and middle initial La				me					Yo	Your social security number		
RAVINDRANATHA			SHAP	UR GOVINDAP	PA				8'	875-35-7586		
If joint return, spouse's first name and middle initial La				me					Sp	Spouse's social security number		
CHANDANA	Α		VISW	ANATHA					2	269-43-8307		
Home address	(numbe	r and street). If you have a P.O. box, see	e instructio	ons.				Apt. no.	Pr	Presidential Election Campaign		
9801 W E	PARME	ER LANE		2424						ere if you,		
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s _l	paces below.	Stat	e	ZIP	code		spouse if filing jointly, want \$3 to go to this fund. Checking a		
AUSTIN					TX	· ·	78	717		box below will not change		
Foreign country	name		F	Foreign province/state/county			Fore	Foreign postal code you		our tax or refund.		
										You		Spouse
Digital Assets		ly time during 2022, did you: (a) rec ange, gift, or otherwise dispose of									Yes	⊠ No
Standard		eone can claim: You as a de					a330	i): (OCC III)	3ti uctio	7113.)		
Deduction	_	Spouse itemizes on a separate retu	•	-		а черепчент						
Age/Blindness	You:	☐ Were born before January 2, 1	1958	Are blind S	oouse:	☐ Was bor	rn be	fore Janua	ry 2, 1	958	☐ Is blir	nd
Dependents	s (see i	instructions):		(2) Social secur	ity	(3) Relationsh	nip	(4) Check th	e box it	qualif	ies for (see i	nstructions):
If more	(1) Fi	rst name Last name		number		to you		Child ta	x credi	t (Credit for oth	er dependents
than four												
dependents, see instructions												<u>] </u>
and check	, 											<u>] </u>
here]
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a	15	3,466.
	b	Household employee wages not r	eported	on Form(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)						1c		
attach Forms	d	Medicaid waiver payments not rep		` ,	instru	ctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits		·						1e		
was withheld.	f	Employer-provided adoption bene	efits from	Form 8839, line 2	9 .					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	,	, i i i i i i i i i i i i i i i i i i i						1h	-	0.
instructions.	i	Nontaxable combat pay election (see instr	ructions)		<u>1i</u>						
		Add lines 1a through 1h		· · · · · · · · · · · · · · · · · · ·						1z	15	3,466.
Attach Sch. B	2a		2a			axable interes				2b		
if required.	3a_		3a			rdinary divide				3b		
	4a	IRA distributions	4a			axable amoun				4b		
Standard Deduction for—	5a	-	5a			axable amoun				5b		
Single or	6a	,	6a			axable amoun	t.			6b	_	
Married filing separately, \$12,950 C If you elect to use the lump-sum election method, check here (see instructions)						. 📙	-					
							. Ш	7		1 107		
Married filing jointly or	8	Other income from Schedule 1, lir		This is your tetal in						8		1,187.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•	•						9	15	4,653.
\$25,900	5,900 Adjustments to income from Schedule 1, line 20							4 (52				
 Head of household, 	11		-	-			•			11		4,653.
\$19,400 If you checked	12 13	Standard deduction or itemized Qualified business income deduct				 5-Δ	•			13	+ - 2	5,900.
any box under	14						•			14	2	5 900
Standard Deduction,	15	Add lines 12 and 13							15		5,900. 8,753.	
see instructions.	10	Capa dot into 14 Hom into 11. Il 26	10 01 168	5, 5111515	your t					13		0,133.

Form 1040 (2022	2)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	19,560.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	19,560.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	19,560.	
	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	19,560.	
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 2	8,053.			
	b	Form(s) 1099				25b	297.			
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	28,350.	
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	,		-			32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	28,350.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	8,790.	
	35a	Amount of line 34 you want					\square	35a	8,790.	
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 8 6 5	1 9 9 8	2 9						
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party Designee		you want to allow another	person to disc	cuss this retur			Complete	below.	X No	
200.900	De	Designee's					•	al identification		
	na	me	no. number (
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pre-								, ,	
Here	Yo	Your signature		Date	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here		
laint vatuus 0				ENGINEER				inst.)	IN, enter it here	
Joint return? See instructions.	Sn	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation				If the IRS sent your spouse an		
Keep a copy for your records.	-,				HOME MAKER HOME MAKER HOME MAKER					
	Ph	one no. (512)977-879	6	Email address	SGRAVI201		M			
D-1-I		eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	VENE	KATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI	04/19/2023	P0247	0833	Self-employed	
Preparer		m's name GLOBAL TA		20211111111 01/12/2023 1 0				678)965-9522		
Use Only								n's EIN	88-2145487	
	I I I I I I I I I I I I I I I I I I I								00 2110107	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

R SHAPUR GOVINDAPPA & C VISWANATHA

Sequence No. 01

Your social security number 875-35-7586

Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes	·		1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach S	Schedule E .	5	
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a	()		
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	()		
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i		-	
j	Activity not engaged in for profit income	8j		-	
k	Stock options	8k		-	
- 1	Income from the rental of personal property if you engaged in the rental	0.1			
	for profit but were not in the business of renting such property	81		-	
m	Olympic and Paralympic medals and USOC prize money (see	0			
	instructions)	8m		-	
n	Section 951(a) inclusion (see instructions)	8n		-	
0	Section 951A(a) inclusion (see instructions)	80		-	
p	Taxable distributions from an ABLE account (see instructions)	8p 8a		-	
q	Scholarship and fellowship grants not reported on Form W-2	oq 8r		-	
r s	Nontaxable amount of Medicaid waiver payments included on Form	OI		-	
5	1040, line 1a or 1d	8s	(
t	Pension or annuity from a nonqualifed deferred compensation plan or	03	()		
·	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:	Ju			
_	Other Income from box 3 of 1099-Misc 1,187.	8z	1,187.		
9	Total other income. Add lines 8a through 8z			9	1,187.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1	040-NR, line 8	10	1,187.

Schedule 1 (Form 1040) 2022 Page **2**

Educator expenses 11	Par	Adjustments to Income			
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 3 IFA desclustion 3 IFA desclustion 4 IFA descl	11			11	
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 3 IFA desclustion 3 IFA desclustion 4 IFA descl	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations 24 Jeli 25 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions): IRA deduction	19a			19a	
20 Student loan interest deduction 21 22 23 24 22 24 24 24 24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m. Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974. Contributions to section 501(c)(18)(D) pension plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions). Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations Housing deduction from Form 2555. Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041). Total other adjustments. List type and amount: 25 Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit				-	
a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		la la		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		rg		
i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				26	

Department of the Treasury

Internal Revenue Service

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Health Savings Accounts (HSAs)

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 52

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

RAVINDRANATHA SHAPUR GOVINDAPPA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 875-35-7586

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. ☐ Self-only X Family HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions 2 0. If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you 3 were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for 3 7,300. Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also 4 Ο. 5 5 7,300. 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2022, see the instructions for the amount to enter . . . 6 7,300. If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage 7 under an HDHP at any time during 2022, enter your additional contribution amount. See instructions . 7 8 8 7,300. 9 Employer contributions made to your HSAs for 2022 10 1,298. 11 11 12 12 6,002. HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 13 13 0. Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete Part II a separate Part II for each spouse. 14a Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were 14b 14c Qualified medical expenses paid using HSA distributions (see instructions) 15 15 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before Part III completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 20 Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f 20 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form

BAA REV 03/22/23 PRO