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.

Check only			_	ed filing separately (M	·	_		, –	spous	se (QSS)	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you ch	eck	ed the HOH or	QSS box, ent	er the	child's r	name if the	qualifying
Your first name	and mi	ddle initial	Last name					Y	Your social security number		
SUDHEER	SUDHEER ADHA					210-82-6039					
				Last name					Spouse's social security number		
SUMAN			RAVU	LAPELLI						4-0780	
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	P	residen	tial Election	n Campaign
10455 E	VIA	LINDA					120			ere if you, o	
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP code				ly, want \$3
SCOTTSDALE			AZ 8			85258	. = . = .		o go to this fund. Checking a ox below will not change		
Foreign country name			F	Foreign province/state/county			Foreign postal code your		our tax or refund.		
										You	_ Spouse
Digital		y time during 2022, did you: (a) rece	,		-		-	,		Yes	⊠ No
Assets		ange, gift, or otherwise dispose of a					asset)? (See II	ISTRUCT	ions.)	res	ĭNU NU
Standard Deduction	_	eone can claim:	'	-							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use	: Was bor	n before Janu	ary 2,	1958	☐ Is blir	nd
Dependents	s (see i	instructions):		(2) Social security		(3) Relationsh	ip (4) Check t	the box	if qualifie	es for (see ii	nstructions):
If more	<b>(1)</b> Fi	First name Last name		number		to you	Child tax ci		dit C	redit for othe	er dependents
than four	DHR	IRUV R ADHA		093-39-8363		Son				×	
dependents, see instructions	PRA	NAV ADHA		677-20-4283	3	Son		×			]
and check											<u> </u>
here									$\perp$		]
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions)					1a	17	6,251.
	b	Household employee wages not re	eported (	on Form(s) W-2					1b		
Attach Form(s) W-2 here. Also	С		reported on line 1a (see instructions)						1c		
attach Forms	d		aiver 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 instructi							1h		0.
instructions.	i	Nontaxable combat pay election (s	ee instr	uctions)		<u>li</u>					
	Z	Add lines 1a through 1h							1z	1.7	6,251.
Attach Sch. B	2a	'	2a			axable interest			2b		
if required.	3a		3a			ordinary divider			3b		
	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 el		,		•		. 📙	_		2 000
\$12,950	7	Capital gain or (loss). Attach Sched						. Ц	7	_	3,000.
Married filing jointly or	8	Other income from Schedule 1, line							8		0.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9	17	3,251.
\$25,900	10	Adjustments to income from Sche	,						10		
Head of household,	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>							11		3,251.
\$19,400	12								12	2	<u>5,900.</u>
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A							13	_	
Standard Deduction,	14							14		<u>5,900.</u>	
see instructions.	15	Subtract line 14 from line 11. If zer	o or iess	s, enter -u This is yo	our 1	laxable incom			15	<u>  14</u>	7,351.

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	23,651.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	23,651.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,500.	
	20	Amount from Schedule 3, line 8	20	674.	
	21	Add lines 19 and 20	21	3,174.	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	20,477.	
	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	20,477.	
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	20,031.	
16	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			
	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 <b>total payments</b>	33	20,031.	
Defund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34		
Refund	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a		
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			
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 www.irs.gov/Payments or see instructions	37	446.	
	38	Estimated tax penalty (see instructions)			
Third Party Designee		you want to allow another person to discuss this return with the IRS? See tructions	nelow	⊠ No	
Designee		signee's Phone Personal identii			
	na		Toution		
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 which			
Here	Yo	ur signature Date Your occupation If the	IRS se	nt you an Identity	
		1		IN, enter it here	
Joint return?		EFFE HOTEE	inst.)		
See instructions. Keep a copy for	Sp		the IRS sent your spouse an entity Protection PIN, enter it here		
your records.			inst.)		
	———Ph	one no. (480)886-6824 Email address ADHASUDHEER@GMAIL.COM			
		pparer's name Preparer's signature Date PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/02/2023 P0208:	2703	Self-employed	
Preparer				678)965-9522	
Use Only			's EIN	84-3171965	