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.

	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	hous	ehold (HOI	H) [ifying surv se (QSS)	iving	
Check only one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	necke	ed the HOH or	QSS	box, ente	er the c		, ,	e qualifying	
		on is a child but not your dependent		,									
Your first name and middle initial				Last name							Your social security number		
NARESH				JARUGULA							***-**-4580		
If joint return, spouse's first name and middle initial				Last name						Spouse's social security number			
MALATHI				BOGGAVARAPU						***-**-9344			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.							Pi	resider	ntial Election	n Campaign			
18943, VICKIE AVE											k here if you, or your		
City, town, or post office. If you have a foreign address, also com-			mplete spaces below. State			ZIP			spouse if filing jointly, want \$3 to go to this fund. Checking a				
CERRITOS			CA							box below will not change			
Foreign country name			Foreign province/state/county			y	Foreign postal code you			our tax or refund.			
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or p	oaym	nent for prope	rty o	r services)	; or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital	asset (or a financial i	ntere	est in a digital	asse	t)? (See in	structi	ons.)	Yes	⊠ No	
Standard	Som	eone can claim:	pendent	t	as a	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status a	alien								
Age/Blindness	You:	☐ Were born before January 2, 1	958 F	Are blind Spo	use:	Was bor	n be	fore Janua	rv 2. 1	958	ls bli	nd	
Dependents		10 To		(2) Social security		(3) Relationsh						instructions):	
If more		rst name Last name		number		to you		Child ta	ax cred	it	Credit for oth	er dependents	
than four									7		Γ	7	
dependents,								Ī	_		Ī		
see instructions and check	s					40						<u> </u>	
here]												
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions)						1a	19	0,095.	
income	b	Household employee wages not re	ported	on Form(s) W-2		V				1b			
Attach Form(s)	C	Tip income not reported on line 1a	(see ins	structions)						1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see in	stru	ctions)				1d			
W-2G and	е	Taxable dependent care benefits f	rom For	m 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 .				12 12 12 21				1g			
get a Form	h	Other earned income (see instructi	ons)							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	ee instr	ructions)		1i							
	Z	Add lines 1a through 1h								1z	19	0,095.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t			2b			
if required.	3a	Qualified dividends	3a		b O	rdinary divide	nds			3b			
	4a	IRA distributions	4a		b Ta	axable amoun	t.			4b			
Standard	5a	Pensions and annuities	5a	1	b Ta	axable amoun	t.			5b			
Deduction for— Single or	6a		6a			axable amoun	t.			6b			
Married filing	C	If you elect to use the lump-sum el	lection r	nethod, check here (see i	nstructions)			. Ц				
separately, \$12,950	7	Capital gain or (loss). Attach Sched		required. If not requ	ired,	check here			. Ш	7			
Married filing jointly or	8	Other income from Schedule 1, line								8		0,688.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	17	9,407.		
surviving spouse, \$25,900	10	Adjustments to income from Schee	dule 1, I	ine 26						10			
Head of	Subtract line 10 from line 9. This is your adjusted gross income								11		9,407.		
household, \$19,400	12	Standard deduction or itemized								12	2	25,900.	
If you checked any box under	13	Qualified business income deducti					11			13		Section 1944	
Standard	14									14	T	25,900.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is yo	our t a	axable incom	ie			15	15	3,507.	

Form 1040 (202	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	25,006.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	25,006.		
	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	25,006.		
	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	25,006.		
Payments	25	Federal income tax withheld from:				
	a	Form(s) W-2				
	b	Form(s) 1099				
	C	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	32,655.		
If you have a qualifying child,	26	2022 estimated tax payments and amount applied from 2021 return	26			
	27	Earned income credit (EIC)	Y			
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				
	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	32,655.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	7,649.		
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	7,649.		
Direct deposit?	b	Routing number * * * * * * X X X X X C Type: Checking Savings				
See instructions.	d	Account number * * * * * * * * *				
	36	Amount of line 34 you want applied to your 2023 estimated tax 36				
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	Do	you want to allow another person to discuss this return with the IRS? See				
Designee	ins	structions	oelow.	X No		
		signee's Phone Personal identi	fication			
	naı					
Sign		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 whicl				
Here				-		
	10		If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?		ENGINEER (see	inst.)			
See instructions. Keep a copy for	Sp			IRS sent your spouse an		
your records.			inst.)	ection PIN, enter it here		
		ENGINEER				
		one no. (562) 762 – 9764 Email address NARESH. JARUGULA@GMAIL. COM eparer's name Preparer's signature Date PTIN		Check if:		
Paid			2702	Self-employed		
Preparer	19					
Use Only	-			(678) 965-9522 **-***1965		
	FIL	III 9 GUOILES SEE TO TOOMET OF E DECINOMINE NO 00010 FILM	's EIN			