<b>1040</b>		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		202	2	OMB No. 1545	-0074	IRS Use Only-	–Do not w	rite or staple	in this space.	
	X	Single  Married filing jointly	] Married filing	separately (N	/IFS)	Head of	house	hold (HOH) [		lifying surv use (QSS)	/iving	
Check only one box.		u checked the MFS box, enter the nation is a child but not your dependent		ouse. If you c	heck	ed the HOH or	QSS	box, enter the	•	( )	e qualifying	
Your first name and middle initial Last name			Last name	ame						Your social security number		
SHRAVAN JANGA			JANGALA	GALA						***-**-2761		
If joint return, spouse's first name and middle initial Last name				ne					Spouse'	's social see	curity number	
Home address (	numbe	r and street). If you have a P.O. box, see	instructions.				ŀ	Apt. no.	Preside	ntial Election	on Campaigr	
2007 ARBOR VISTA DR									Check h	nere if you,	or your	
	ce. If you have a foreign address, also co	low.	Sta	State ZIP code			spouse if filing jointly, want \$3 to go to this fund. Checking a					
CHARLOTTE				NC			282			ow will not		
Foreign country name			Foreign p	Foreign province/state/county						or refund.	0	
								You	Spouse			
Digital	At an	ny time during 2022, did you: (a) rec	eive (as a rewar	d, award, or	payr	ment for prope	rty or	services); or	(b) sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital asset (o	r a financial i	inter	est in a digital	asset)	? (See instruc	ctions.)	Yes	X No	
Standard Deduction		eone can claim:				a dependent						
		Were born before January 2, 1			ouse	_	n befo	ore January 2	, 1958	Is bl	ind	
Dependents	(see	instructions):	(2)	Social security	1	(3) Relationsh	ip (4	) Check the bo	x if quali	fies for (see	instructions):	
If more		rst name Last name		number		to you		Child tax cre	edit	Credit for ot	her dependents	
than four										[		
dependents, see instructions	2									[		
and check										[		
here 🗌	2									[		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see instruc	ctions) .		• • • •			1a		96,117.	
	b	Household employee wages not re					• •	· · · ·	1b	ñ		
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a				• • • •	• •	· · · ·	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 f				• • • •			1e	0		
was withheld.	f	Employer-provided adoption bene	fits from Form 8	3839, line 29			• •		1f			
lf you did not	g	Wages from Form 8919, line 6 .				а на на н			1g	<u> </u>		
get a Form W-2, see	h	Other earned income (see instruct		• • • •	• •	· · · ·	· ·		1h	1	0.	
instructions.	i	Nontaxable combat pay election (s	see instructions)		• •	<u>1</u> i			_			
	Z	Add lines 1a through 1h	$\cdot$ $\cdot$ $\cdot$ $\cdot$	· · · ·	• •	• • • •	• •	· · · ·	1z	-	96,117.	
Attach Sch. B	2a		2a			axable interes		· · · ·	2b			
if required.	3a		3a			Ordinary divide			3b			
	4a		4a			axable amoun			4b			
Standard Deduction for— • Single or	5a		5a			axable amoun			5b			
	6a		6a			axable amoun	t		6b			
Married filing separately,	c	If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									0 750	
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin		e e e e					8		<u>-8,753.</u>	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		our total inc		e			9		37,364.	
\$25,900	10	Adjustments to income from Sche	10									
<ul> <li>Head of household,</li> </ul>	<u>11</u> 12	Subtract line 10 from line 9. This is		•					11		<u>37,364.</u>	
\$19,400	<u>12</u> 13	Standard deduction or itemized Qualified business income deduct				· · · ·	• •		12 13		12,950.	
<ul> <li>If you checked any box under</li> </ul>	13				033	JU-A			13		12 050	
Standard Deduction,	14										<u>12,950.</u> 74,414.	
see instructions.				0 . 1113 13 y	Jui				15		· · , · · · · · ·	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2022)

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	11,991.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	11,991.
	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	11,991.
	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	11,991.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	C	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	13,914.
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
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	4	
	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	270 No. No
	33	Add lines 25d, 26, and 32. These are your total payments	33	13,914.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,923.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	1,923.
Direct deposit? See instructions.	b	Routing number * * * * * 0 1 9 6 c Type: Checking Savings		
	d	Account number * * * * * * * * * * * 7 3 1 7		
	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 <b>amount you owe</b> .		
rou Owe	38	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
Third Darby		Estimated tax penalty (see instructions)		
Third Party Designee		structions $\ldots$	elow.	× No
Designee		signee's Phone Personal identif		
	nar			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to		
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
	Yo			nt you an Identity N, enter it here
Joint return?			inst.)	
See instructions.	Sp		IRS ser	nt your spouse an
Keep a copy for your records.		Ident (see	-	ection PIN, enter it here
your records.			.nst.)	
Paid		one no. (571)201-0176 Email address SHAH.SHRAVAN01@GMAIL.COM		Ohaala ifa
		Paparer's name Preparer's signature Date PTIN	2702	Check if:
Preparer	-	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/26/2023 *****2		Self-employed
Use Only				678) 965-9522
			's EIN	**-**5487
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 01/14/23 PRO		Form 1040 (2022)

rs.gov/Form1040 for instructions and the