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	househo	old (HOH	H)		fying survi se (QSS)	ving		
Check only one box.	If vo	u checked the MFS box, enter the na	ame of v	our spouse. If you ch	necked	the HOH or	QSS b	ox. ente	r the c		` ,	e aualifvina		
	-	on is a child but not your dependent	-	,,,,,,,				,						
Your first name and middle initial La:			Last na	_ast name							Your social security number			
HEMANTH RAMKUMAR RED PULU				JLUGUM							***-**-4269			
the state of the s			Last na							Spouse's social security number				
NIHARIKA	A		GORL	RT.A						****ED FOR				
	1077	er and street). If you have a P.O. box, see		V-100			Ap	t. no.	-			n Campaign		
16 COMMONS CIRCLE							4	CI	neck he	eck here if you, or your				
City, town, or post office. If you have a foreign address, also complete s				ete spaces below. State 2			ZIP cod					ly, want \$3		
LAKE ZURICH				IL							w will not a	Checking a change		
Foreign country name			F	Foreign province/state/county						your tax or refund.				
											You	Spouse		
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or i	paymer	nt for prope	rty or se	ervices)	; or (b)	sell,				
Assets		ange, gift, or otherwise dispose of a									Yes	<b>⊠</b> No		
Standard	Som	eone can claim:	pendent	Your spouse	e as a d	lependent								
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status a	alien		7/							
Ago/Blindness	Varia	Were born before January 2, 1	050	7 Are blind Sno		Was bor	n hofor	o lanua	m, 2 1	050	Is blii	nd		
	_		936 _	Ī .	use:	_		_	, ,			nstructions):		
Dependents				(2) Social security number	(	<ol><li>Relationsh to you</li></ol>	lip (4)			. I				
If more than four	(1) F	rst name Last name		Hamboi		10 you		Child tax cre		1 (	realt for oth	er dependents		
dependents,	9								┽	_		<del></del>		
see instruction	s							L		_				
and check here $\Box$	1 —					1			_			┽──		
	12	Total amount from Form(s) W-2, bo	ov 1 (co	o inetructions)						1a		0,855.		
Income	1a b	Household employee wages not re		64-61 102-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	1			•		1b	0	0,033.		
Attach Form(s)	C									1c	) )			
W-2 here. Also	d	The state of the s	Fip income not reported on line 1a (see instructions)											
attach Forms W-2G and	e	Taxable dependent care benefits from Form 2441, line 26							1d 1e					
1099-R if tax	f	Employer-provided adoption bene	-							1f				
was withheld.	g	Wages from Form 8919, line 6.	into iroir	11 0111 0003, 1110 23						1g				
If you did not get a Form	h	Other earned income (see instructi	one							1h		0.		
W-2, see	i	Nontaxable combat pay election (s		ructions)		. l 1i	ì			- 111				
instructions.	z	Add lines 1a through 1h	oc mon	dollono,						1z	8	0,855.		
Attach Sch. B	2a		2a		h Taya	able interest				2b		0,000.		
if required.	3a		3a			nary divider				3b				
	4a	And the second s	4a			able amount				4b				
Standard	5a		5a			able amount				5b				
Deduction for—	6a		6a			able amount				6b				
Single or Married filing	С	If you elect to use the lump-sum e							. 🗀	0.0				
separately,	7	Capital gain or (loss). Attach Scheo							. $\Box$	7				
\$12,950 Married filing	8	Other income from Schedule 1, lin								8		0.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								9	8	0,855.		
surviving spouse,	10	Adjustments to income from Sche		(E)						10		<del></del>		
\$25,900 Head of	11	Adjustments to income from Schedule 1, line 26								11	8	0,855.		
household,	12	Standard deduction or itemized deductions (from Schedule A)								12		5,900.		
\$19,400 If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A										<u></u>		
any box under	14	Add lines 12 and 13								13	2	5,900.		
Standard Deduction,	15								15		4,955.			
see instructions.			2. 1000	-, -, 5 1 11110 10 y					•			1,000.		

Form 1040 (202	2)			Page <b>2</b>		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	6,186.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	6,186.		
	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	6,186.		
	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	6,186.		
Payments	25	Federal income tax withheld from:				
. aymonto	а	Form(s) W-2				
	b	Form(s) 1099				
	C	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	10,849.		
	26	2022 estimated tax payments and amount applied from 2021 return	26			
If you have a qualifying child,	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	10,849.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	4,663.		
neiuliu	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	4,663.		
Direct deposit?	b	Routing number * * * * * * 1 8 2 5 c Type: X Checking Savings				
See instructions.	d	Account number   *   *   *   *   7   9   9   8				
	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> .  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		structions	elow.	<b>X</b> No		
		signee's Phone Personal identif	ication			
	na		Section Co.			
Sign	Un	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		
Here						
	10		If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?		CONSTRUCTION DESIGN/PROJE (see	inst.)			
See instructions.	Sp			IRS sent your spouse an		
Keep a copy for your records.			•	ection PIN, enter it here		
,		HOME MARKER	1131.)			
		one no. (331) 457-2050 Email address HEMANTHREDDY45@GMAIL.COM		Observativity		
Paid		eparer's name Preparer's signature Date PTIN	200	Check if:		
Preparer	17	1 PRIYA RAM SAGAR CUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/23/2023 *****				
Use Only	0		ne no. (678) 965-9522			
- ,	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816	s FIN **-**5487			