E 1040 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.

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	household	HOH) b	H)		fying survi se (QSS)	ving	
one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	necked	d the HOH or	QSS box	k, ente	r the c		` ,	qualifying	
	-	on is a child but not your dependent	-	,									
Your first name	and mi	ddle initial	Last nar	ast name							Your social security number		
VALKALADATTA GORL				RLAMARI						***-**-5328			
If joint return, spouse's first name and middle initial Last name			name						Spouse's social security number				
ANUSHA CHENNUPATI						*					***-**-0792		
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt.	no.	Pr	esiden	tial Election	n Campaign	
16 COMMONS CIR							Check here if you, or your spouse if filing jointly, want \$3						
City, town, or post office. If you have a foreign address, also complete:				olete spaces below. State			ZIP code				filing joint his fund. C		
LAKE ZURICH				IL							w will not o		
Foreign country name			F	Foreign province/state/county			Foreign postal code you			your tax or refund.			
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or p	payme	ent for prope	rty or ser	vices);	or (b)	sell,			
Assets		ange, gift, or otherwise dispose of a									Yes	X No	
Standard	Som	eone can claim:	pendent	Your spouse	e as a	dependent							
Deduction		Spouse itemizes on a separate return	n or you	were a dual-status a	alien								
A a. a. /Diina da a a	V		050 [	7 A I-151 0					0 1	050		1	
	_	Were born before January 2, 1	958 _	· ·	use:	_	n before	_	, ,		☐ Is blir		
Dependent				(2) Social security number		(3) Relationsh				. I		nstructions):	
If more	(1)	rst name Last name	number			to you		Child tax cre		t C	redit for othe	er dependents	
than four dependents,	9				- 4						<u>_</u>		
see instruction	s —							<u> </u>			L		
and check						404		<u> </u>	<del> </del>				
here		T. I				1		L				0 100	
Income	1a	Total amount from Form(s) W-2, be		44-41 YEAR OLD SERVICE SERVICE	1				- 1	1a	33	8,108.	
Attach Form(s)	b	Household employee wages not re			•					1b	-		
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)							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			
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 instruction					1			1h		0.	
instructions.	i	Nontaxable combat pay election (s	ee instr	ructions)	•	<u>l 1i</u>							
	Z	Add lines 1a through 1h			•				•	1z	33	8,108.	
Attach Sch. B	2a		2a	1.0		cable interest			•	2b			
if required.	3a	And the second s	3a			dinary divider				3b		12.	
	4a		4a			cable amoun				4b			
Standard Deduction for—	5a		5a			(able amoun				5b	1		
Single or	6a		6a			able amoun	t			6b			
Married filing separately,	С	If you elect to use the lump-sum e							. 📙				
\$12,950	7	Capital gain or (loss). Attach Sched		required. If not requ	ired, c	check here			. Ш	7		<u>-90.</u>	
Married filing jointly or	8	Other income from Schedule 1, lin								8	-1	5,350.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your <b>total inc</b>	ome					9	32	2 <b>,</b> 680.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10			
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income							11	32	2,680.		
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								12	2	5,900.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A								13			
any box under Standard	14	Add lines 12 and 13								14	25,900.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is yo	our <b>ta</b> :	xable incom	ie			15	<b>5</b> 296,780.		

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	58,897.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	58 <b>,</b> 897.		
	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	58,897.		
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	884.		
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	59,781.		
Payments	25	Federal income tax withheld from:				
	a	Form(s) W-2				
	b	Form(s) 1099				
	C	Other forms (see instructions)	7			
	d	Add lines 25a through 25c	25d	49,087.		
16	26	2022 estimated tax payments and amount applied from 2021 return	26			
If you have a qualifying child,	27	Earned income credit (EIC)	T			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812				
	29	American opportunity credit from Form 8863, line 8	5			
	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	5,094.		
	33	Add lines 25d, 26, and 32. These are your total payments	33	54,181.		
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			
neiuna	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 C Type: Checking Savings				
See instructions.	d	Account number   *   *   *   *   *   *   *   *   *				
	36	Amount of line 34 you want applied to your 2023 estimated tax 36				
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		F (60.0		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	5,600.		
	38	Estimated tax penalty (see instructions)				
Third Party		by you want to allow another person to discuss this return with the IRS? See structions	holow	X No		
Designee		signee's Phone Personal ident		NO		
	nai		incation			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t				
Here	bel	lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic	h prepare	er has any knowledge.		
11010	Yo			nt you an Identity IN, enter it here		
l=:t0			e inst.)	IN, enter it here		
Joint return? See instructions.	Sp		the IRS sent your spouse an			
Keep a copy for	919	Ider	ntity Prote	ection PIN, enter it here		
your records.	-	SR. SOFTWARE DEVELOPER (see	e inst.)			
		one no. (408) 477-0877 Email address VALKAL.GV@GMAIL.COM				
Paid	Pre	eparer's name Preparer's signature Date PTIN		Check if:		
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/04/2023 *****	2703	Self-employed		
Use Only	Fin		hone no. (678) 965-9522			
	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	Firm's EIN **-**1965			