1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		202	2	OMB No. 1545-	0074	IRS Use Only-	-Do not w	rite or staple i	n this space.	
Check only] Married filing		,			hold (HOH) [spou	lifying surv use (QSS)	0	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		use. If you ch	ieck	ed the HOH or	QSS	box, enter the	child's	name if th	e qualifying	
Your first name and middle initial Last name			Last name							Your social security number		
SANTOSH	KUMA	AR VARMA	KALIDINDI	IDINDI					***-**-4408			
If joint return, spouse's first name and middle initial Last name				ne					Spouse'	s social sec	urity number	
	r and street). If you have a P.O. box, see	instructions.	ns.						Presidential Election Campaign Check here if you, or your			
	DGE CIRCLE								spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also complete sp									to go to this fund. Checking a			
DOWNINGTOWN				PA			193			ow will not	change	
Foreign country name Fc				oreign province/state/county			Foreign postal code you			or refund.	Spouse	
Digital Assets		y time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								Yes	X No	
Standard		eone can claim: You as a de		Your spouse								
Deduction		Spouse itemizes on a separate retur	n or you were a	dual-status a	alien	_						
		Were born before January 2, 1			use			bre January 2, Check the box		Is bli		
Dependents		Instructions): rst name Last name	(2) \$	Social security number		(3) Relationsh to you	p (Child tax cre	- î I		ner dependents	
lf more than four	(1) 1								Juit			
dependents,										C	╡───	
see instructions	s ——									L	╡───	
and check here											╡───	
	1a	Total amount from Form(s) W-2, b	ox 1 (see instruc	ctions)					1a	6	38,369.	
Income	b	Household employee wages not re							1b			
Attach Form(s)	С	Tip income not reported on line 1a	(see instruction	is)					1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	s) W-2 (see in	stru	ctions)			1d				
W-2G and	е	Taxable dependent care benefits f	rom Form 2441	line 26 .					1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from Form 8	839, line 29					1f			
If you did not	g	Wages from Form 8919, line 6 .				n (1. m. n			1g			
get a Form	h	Other earned income (see instruct	ons)		÷		ų s		1h	1	0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instructions)	.		<mark>1</mark> i						
	z	Add lines 1a through 1h					• •		1z	8	38,369.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	-		2b			
if required.	3a	Qualified dividends	3a		b O	rdinary divider	nds .		3b			
	4a	IRA distributions	4a		b Ta	axable amount			4b	1		
Standard	5a	Pensions and annuities	5a		b Ta	axable amount			5b	(
 Deduction for— Single or 	6a		6a			axable amount	· ·	<u>.</u>	6b			
Married filing separately,	С	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										
 Married filing jointly or 	8	Other income from Schedule 1, line 10							8		7,807.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		our total inco					9		30,562.	
surviving spouse, \$25,900	10	Adjustments to income from Sche	10									
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income									30,562.	
\$19,400 r	12	Standard deduction or itemized			1	· · · ·	· .		12		12,950.	
 If you checked any box under 	13	Qualified business income deduct				5-A	1	· · · ·	13		0 0 0 0 0	
Standard Deduction,	14 15	Add lines 12 and 13								-	<u>2,950.</u>	
see instructions.	13		o or less, enter	-0 THIS IS YO			ι.		15	6	57,612.	

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

Form 1040 (2022)

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	10,495.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	10,495.
	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	10,495.
	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	10,495.
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	14,113.
If you have a qualifying child, attach Sch. EIC. [26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use	4	
	31	Amount from Schedule 3, line 15		
	32 33	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	14,113.
	100.003	Add lines 25d, 26, and 32. These are your total payments	33	3,618.
Refund	34 35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34 35a	3,618.
	b soa	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	358	5,010.
See instructions.	d	Account number * * * * * * * * 9 1 7 6		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe	57	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.	X No
·		signee's Phone Personal identif	ication	
	na			
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 which		
Here				nt you an Identity
	10			N, enter it here
Joint return?		MANUFACTURING ENGINEER (see i	nst.)	
See instructions. Keep a copy for	Sp			nt your spouse an
your records.		ldent (see i		ection PIN, enter it here
	Ph			
Paid		one no. (913)202-9977 Email address SANTOSHKALIDIND19@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:
		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/07/2023 ****2	202	Self-employed
Preparer				678) 965-9522
Use Only	-	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'		**-***1965
Go to www irs a		n1040 for instructions and the latest information. BAA REV 03/22/23 PRO		Form 1040 (2022)
g.				

rs.gov/Form1040 for instructions and the