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.

Filing Status	X S	single Married filing jointly	Marrie	ed filing separately (N	/IFS)	Head of	house	hold (HOH)			fying survi se (QSS)	ving	
Check only one box.	If yo	u checked the MFS box, enter the r	name of y	our spouse. If you cl	hecke	d the HOH or	QSS	box, enter				qualifying	
		on is a child but not your depender											
Your first name	and mi	ddle initial	Last nar	ast name						Your social security number			
UDAYA SRI DEVA				VAGUPTAPU						***-**-8609			
If joint return, spouse's first name and middle initial Last na									Sp	Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, se	netructic	ons				Apt. no.	Dre	ocidon	tial Election	n Campaign	
				207							ere if you, o		
5519 ARAPAHO ROAD City, town, or post office. If you have a foreign address, also complete				olete spaces below. State ZIF				spc		ouse it	filing joint	y, want \$3	
DALLAS								to		to go to this fund. Checking a box below will not change			
Foreign country name			F	Foreign province/state/county				~~		your tax or refund.			
. o.o.g oodydo				, or origin provinces, craite, country						You Spouse			
Digital		y time during 2022, did you: (a) red					-						
Assets		ange, gift, or otherwise dispose of		<u></u>			asset)	? (See ins	tructio	ns.)	∐ Yes	⊠ No	
Standard Deduction	_	eone can claim:		•		dependent							
Age/Blindness	You:	Were born before January 2,	1958	Are blind Spo	ouse:	☐ Was bor	n befo	ore Januar	y 2, 19	958	☐ Is blir	nd	
Dependents	(see	nstructions):		(2) Social security	,	(3) Relationsh	nip (4) Check the	box if	qualifi	es for (see ii	nstructions):	
If more		rst name Last name		number		to you		Child tax cre			Credit for other	er dependents	
than four													
dependents, see instructions]]	
and check	· —					702	>]]	
here													
Income	1a	Total amount from Form(s) W-2, k	oox 1 (see	e instructions)						1a	13	1,748.	
	b	Household employee wages not r	eported	on Form(s) W-2 .						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	a (see ins	structions)						1c			
attach Forms	d	Medicaid waiver payments not re	payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26								1e			
was withheld.	f	Employer-provided adoption benefits 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 instruc								1h		0.	
instructions.	i	Iontaxable combat pay election (see instructions)											
		Add lines 1a through 1h								1z	13	1,748.	
Attach Sch. B	2a	Tax-exempt interest	2a			xable interest				2b			
if required.	3a_	Qualified dividends	3a	,		dinary divider			•	3b			
	4a	IRA distributions	4a			xable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a			xable amoun			•	5b			
Single or	6a	Social security benefits	6a	mathad abadi bara		xable amount	ι		·	6b			
Married filing separately,	с 7	If you elect to use the lump-sum election method, check here (see instructions)								7			
\$12,950 Married filing	8									8	1	2,000.	
jointly or	9								•	9		9,748.	
Qualifying surviving spouse,	10	Adjustments to income from Sche	Sb, 7, and 8. This is your total income								+ ++	<i>,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
\$25,900	11	Subtract line 10 from line 9. This is your adjusted gross income							•	10	11	9,748.	
Head of household,	12	Standard deduction or itemized deductions (from Schedule A)								12		9,740. 2,950.	
\$19,400 If you checked	13	Qualified business income deduc		,	,	-A .			•	13		<u>,</u> _	
any box under Standard	14	Add lines 12 and 13						14	1	2,950.			
Deduction,	15								15				
see instructions.				., 2					-			-,	

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	19,467.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	19,467.		
	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	19,467.		
	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	19,467.		
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	21,629.		
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26			
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				
allach Sch. ElC.	28	Additional child tax credit from Schedule 8812				
	29	American opportunity credit from Form 8863, line 8				
	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	21,629.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,162.		
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,162.		
Direct deposit? See instructions.	b	Routing number * * * * * 0 3 5 8 c Type: X Checking Savings				
oee mandenons.	a	Account number * * * * * * * * * 1 4 6 0				
	36	Amount of line 34 you want applied to your 2023 estimated tax				
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37			
	38	Estimated tax penalty (see instructions)				
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	elow.	X No		
	De	signee's Phone Personal identif	ication			
	naı	ne no. number (PIN)				
Sign Here		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which				
пеге	Yo			nt you an Identity		
			Protection PIN, enter it here (see inst.)			
Joint return? See instructions.		SOF IWARE ENGINEER		nt vous en oues en		
Keep a copy for your records.	Sp	Ident	the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)			
	———	one no. (510)298-9901 Email address DEVA.UDAYA01@GMAIL.COM				
		eparer's name Preparer's signature Date PTIN		Check if:		
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/24/2023 *****2	777	Self-employed		
Preparer				(678)965-9522		
Use Only			s EIN	**-***1965		
		111111		1703		