Filing Status Single Married filing separately (MFS) Head of household (HOH) Dealifying surviving guote (GSI) Check on More Status If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying surviving guote (GSI) Married filing Status Your seciel security number Your first name and middle initial Last name Your seciel security number *** - ** - 20:34 Home address (number and street). If you have a P.O. box, see instructions. Apt. In O. President Beeling Campaign 1021 HOOPER_STREET Check here if you, roy cur Scheme Status Apt. In O. President Beeling Campaign 1032 HOOPER_STREET Foreign province/status Apt. In O. President Beeling Campaign Scheme Status In O. 1041 HOOPER_STREET Foreign province/status In orgen province/status Apt. In O. OB 87.3 In orgen province/status	1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Ta		202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	vrite or staple	in this space.	
perison is a child but not your dependent: KANTHEXENAGE PARUPAILY Your fiet name and middle initial Last name AR IBANDI Hjourt exturn, spoales fiet name and middle initial Last name AP Into the spoales for the second seco	Check only									spor	use (QSS)	0	
Too: finat name and middle initial Last name Your codel security number SPANDANA ARIBANDI +++++2.29.4 Home address (number and street), if you have a P.O. box, see instructions. Apt. no. Proceeding address, also complete spaces below. Chy, town, or port difke. If you have a P.O. box, see instructions. Apt. no. Proceeding address, also complete spaces below. SOMERSET Chy, town, or port difke. If you have a foreign address, also complete spaces below. State 2P code Foreign country name Foreign province/state/county Pransport difke. If you have a foreign address, also complete spaces below. State 2P code Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property on services) or before danuary 2, 1958 Not Standard Soce on demixt You as a dependent You as a dependent Dependents Secure termixes on a separate return or you were a dual-status allen Chait tax creat Code to chreat dependent If more different addition in tail demixer (1) First name Last name Proceeding to code to chait demixer Code to chait demixer If a total amount from Form(s) W-2, loss Are blind Spouse: Was bom before danuary 2, 1958 Is blind Dependents, reacher addits from Form(s) W-2, loss<	one box.							000		c crinici c		ie quaitying	
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102.1 HOOPER STREET Office/Energination of your O										***_	**-347	8	
Avg. Income State ZIP code spouse if filling jointly, want \$3 SOMERSET NJ 0.837.3 box below will not change Foreign country name Foreign province/state/country Foreign province/state/country State box below will not change Digital At any time during 2022, did you: (a) receive (as a reward, or payment for property or services), in (b) self. Yeu Spouse Standard Someone can claim: You as a dependent Your spouse as a dependent Yeu Spouse Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Stindness Yeu Spouse: (a) Relationship (4) Check the box if qualifies of (see instructions); If more than four dependents, see instructions; (1) First name Last name number (a) Spouse: (a) Relationship (4) Check the box if qualifies of (see instructions); If more than form (1) First name Last name number (b) Spouse (c) a ta archit (c) chid tax credit (c) chid tax credit <t< td=""><td>Home address (</td><td>numbe</td><td>r and street). If you have a P.O. box, see</td><td>instructions.</td><td></td><td></td><td></td><td>A</td><td>Apt. no.</td><td>Preside</td><td>ntial Election</td><td>on Campaigr</td></t<>	Home address (numbe	r and street). If you have a P.O. box, see	instructions.				A	Apt. no.	Preside	ntial Election	on Campaigr	
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\$25,900 10 Adjustments to income form ochedule 1, inte 20 11 13 • Head of household, \$19,400 12 Standard deduction or itemized deductions (from Schedule A) 11 135,073. • If you checked any box under standard 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 12 12,950. • If you checked any box under standard 14 12,950. 13 14 12,950. • If you checked any box under standard 14 12,950. 13 14 12,950. • If you checked any box under standard 14 12,950. 13 14 12,950.	Qualifying											35,073.	
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	Standard												
		15	Subtract line 14 from line 11. If zer	o or less, er	nter -0 This is y	our	taxable incom	е.		15		22,123.	

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	23,138.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	23,138.
	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	23,138.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	204.
	24	Add lines 22 and 23. This is your total tax	24	23,342.
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	26,398.
lf	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a 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		
	30	Reserved for future use	1	
	31	Amount from Schedule 3, line 15	1	
	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	26,398.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,056.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,056.
Direct deposit?	b	Routing number * * * * * 0 3 3 9 c Type: X Checking Savings		
See instructions.	d	Account number * * * * * * * * 1 8 0 9		
	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	•	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		tructions	below.	× No
Ū	De	signee's Phone Personal identi	fication	
	nar	ne no. number (PIN)		
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 PIN, enter it here
Joint return?			inst.)	
See instructions.	Sp		e IRS se	nt your spouse an
Keep a copy for your records.				ection PIN, enter it here
your records.			inst.)	
		one no. (601)287-1437 Email address SPANDANA.ARIBANDI@GMAIL.COM		1
Paid	Pre	eparer's name Preparer's signature Date PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/11/2023 *****		Self-employed
Use Only	Fin		ne no. ((678)965-9522
	Firi	m's address 245 ROONEY CT E BRUNSWICK NJ 08816	's EIN	**-**1965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/05/23 PRO		Form 1040 (2022)

s.gov/Form1040 for instructions and t