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	house	hold (HO	H)		fying surv se (QSS)	iving	
one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	neck	ed the HOH or	r QSS	box, ent	er the c		, ,	e qualifying	
	pers	on is a child but not your dependent	:										
Your first name	and mi	ddle initial	Last name							Your social security number			
ASHOK REDDY BA				BALINENI							***-**-2860		
If joint return, s	pouse's	first name and middle initial	Last nar	st name						Spouse's social security number			
SAHITI BOMN				MMAREDDY						***-**-4426			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			1	Apt. no.	Pr	esiden	tial Election	n Campaign	
3203 WEST SPINGS DRIVE 207							Check here if you, or your						
City, town, or post office. If you have a foreign address, also complet			mplete sp	plete spaces below. State			ZIP c				spouse if filing jointly, want \$3 to go to this fund. Checking a		
ELLICOTT CITY				MD			210				box below will not change		
Foreign country name			F	Foreign province/state/county			Foreign postal code you			our tax or refund.			
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or p	payn	nent for prope	rty or	services	); or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (or a financial i	ntere	est in a digital	asset)	? (See in	structi	ons.)	Yes	⊠ No	
Standard	Som	eone can claim:	pendent	Your spouse	e as	a dependent							
<b>Deduction</b>		Spouse itemizes on a separate retur	n or you	were a dual-status a	alien								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use	: Was bor	rn befo	ore Janua	arv 2. 1	958	☐ Is bli	nd	
Dependents	_	(#C #7)		(2) Social security		(3) Relationsh		_	, ,			instructions):	
If more		rst name Last name		number		to you		Child tax cr		t c	Credit for oth	er dependents	
than four	-	ASH AYAN REDDY BALINENI		***-**-8158	R	Son		X			Γ	<del></del>	
dependents,	9.	ion mini nabbi Dillilivativi		0130		5011					Ī	<del></del>	
see instruction and check	s					40	>		_		Ī	<del></del>	
here $\square$	]					1					Ī	<del></del>	
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)	1					1a	18	5,145.	
IIICOIIIE	b	Household employee wages not re	eported o	on Form(s) W-2		<b>Y</b>				1b			
Attach Form(s)	C	Tip income not reported on line 1a (see instructions)							1c				
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	ot reported on Form(s) W-2 (see instructions)							1d			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax 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	h	Other earned income (see instructions)							1h		0.		
W-2, see	i	Nontaxable combat pay election (s	see instr	uctions)		1i	i						
instructions.	Z	Add lines 1a through 1h								1z	18	5,145.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t.			2b			
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divider	nds .			3b			
	4a	IRA distributions	4a		b Ta	axable amoun	t			4b			
Standard	5a	Pensions and annuities	5a		b Ta	axable amoun	t			5b			
Deduction for—	6a	Social security benefits 6a b Taxable amount							6b				
Single or Married filing	С	If you elect to use the lump-sum e	lection n	nethod, check here (	see	instructions)							
separately, \$12,950	7	Capital gain or (loss). Attach Scheo	dule D if	required. If not requ	ired,	, check here				7	_	3,000.	
Married filing	8	Other income from Schedule 1, line 10								8		0.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	18	2,145.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26											
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	18	2,145.	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)										5,900.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A											
any box under Standard	14	Add lines 12 and 13								14	2	5,900.	
Deduction, see instructions.	15									15		6,245.	
occ monucions.													

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	25,608.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	25,608.		
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,000.		
	20	Amount from Schedule 3, line 8	20	600.		
	21	Add lines 19 and 20	21	2,600.		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	23,008.		
	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	23,008.		
<b>Payments</b>	25	Federal income tax withheld from:				
,	а	Form(s) W-2				
	b	Form(s) 1099				
	C	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	20,514.		
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26			
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				
	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	20,514.		
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			
riciana	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				
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	2,500.		
	38	Estimated tax penalty (see instructions)				
Third Party	Do	you want to allow another person to discuss this return with the IRS? See				
Designee	ins	oelow.	<b>X</b> No			
		signee's Phone Personal identi	fication			
	naı					
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			IN, enter it here		
Joint return?		BI DEVELOPER (see	inst.)			
See instructions. Keep a copy for	Sp		the IRS sent your spouse an			
your records.			inst.)	ection PIN, enter it here		
		THE STOBERT				
		one no. (678) 956-9745 Email address BALINENIASHOKREDDY@GMAIL.COM sparer's name Preparer's signature Date PTIN		Check if:		
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/14/2023 *****	2702	Self-employed		
Preparer	1					
Use Only	-		ne no. (678) 965-9522 n's EIN **-**1965			
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