E1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status	S 🔀 🤅	Single Married filing jointly	Married	filing separately	(MFS)	☐ Head of	household (HOH)			fying surv	iving	
Check only one box.		u checked the MFS box, enter the n		ur spouse. If you	ı check	ed the HOH or	QSS box, enter			se (QSS) name if th	e qualifying	
Vour first name			Last name					Vo	ur sod	ial securit	v number	
Manager Committee Committe									Your social security number ***-**-7191			
PRASANNA KUMAR CHINTHAPATLA  If joint return, spouse's first name and middle initial  Last name										Spouse's social security number		
ii joint return, s	pouse	s instruction and middle initial	Lastrianie					Sp.	opouco o docial cocarty riambor			
Home address	(numbe	er and street). If you have a P.O. box, see	instruction:	S.			Apt. no.	Pre	sider	tial Flection	n Campaign	
13145 N			317						ere if you,			
	ce. If you have a foreign address, also co	omplete spa	ete spaces below. State			ZIP code	spou		use if filing jointly, want \$3			
AUSTIN				TX			78750		o go to this fund. Checking a box below will not change			
Foreign country	/ name		For	Foreign province/state/count		70				or refund.	Jilange	
									You Spouse			
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a	reward award	or payr	nent for prope	rty or services).	or (b)	sell			
Assets		ange, gift, or otherwise dispose of								Yes	X No	
Standard		eone can claim: You as a de		Your spo								
Deduction		— Spouse itemizes on a separate retur										
	-	☐ Were born before January 2, 1		100 1001000 1000 100	pouse	: Was bor	n before Januar	v 2, 19	958	☐ Is bli	nd	
Dependents	_		T	(2) Social secu	•	(3) Relationsh		•				
If more		rst name Last name		number to you			Child tax cre		[(	Credit for oth	er dependents	
than four								1	$\neg$	Γ	7	
dependents,								]	$\neg$	Ī	<u> </u>	
see instructions and check	s ——					40		]			<u> </u>	
here								]				
Income	1a	Total amount from Form(s) W-2, b	oox 1 (see i	nstructions) .					1a	12	2,929.	
income	b	Household employee wages not reported on Form(s) W-2										
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 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										
If you did not	g	Wages from Form 8919, line 6 .						1.1	1g			
get a Form	h	Other earned income (see instruct	tions) .						1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (	see instruc	ctions)		1i						
	Z	Add lines 1a through 1h						•	1z	12	2,929.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest		•	2b			
if required.	3a	A STATE OF THE PROPERTY OF THE	3a			rdinary divider		•	3b			
	4a		4a		b Ta	axable amoun	t		4b			
Standard Deduction for—	5a		5a			axable amoun			5b			
Single or	6a		6a			axable amoun	t		6b			
Married filing separately,	С	If you elect to use the lump-sum e										
\$12,950	7	Capital gain or (loss). Attach Sche						Ш	7			
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, line 10							9		0,233.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								11	2,696.	
\$25,900	10	Adjustments to income from Schedule 1, line 26									0.606	
<ul> <li>Head of household,</li> </ul>	11										2,696.	
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)							12	1	2,950.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A						13	-	0.050		
Standard Deduction,	14	Add lines 12 and 13							14		2,950.	
see instructions.	15	Subtract line 14 from line 11. If Zel	or less,	enter -U Trils i	s your t	axable incom	ie	•	15	1 9	9,746.	

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	17,770.			
Credits	17	Amount from Schedule 2, line 3	17				
	18	Add lines 16 and 17	18	17,770.			
	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	17,770.			
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.			
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	17,770.			
Payments	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	22,174.			
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)	Y				
	28	Additional child tax credit from Schedule 8812					
	29	American opportunity credit from Form 8863, line 8	7				
	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	22,174.			
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	4,404.			
neiuliu	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	4,404.			
Direct deposit? See instructions.	b	Routing number   *   *   *   *   *   0   3   2   2   c Type:					
	d	Account number   *   *   *   *   *   *   *   1   9   6   0					
	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> .					
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	ins	structions	elow.	<b>X</b> No			
			Personal identification number (PIN)				
	nai		u to				
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	Yo	ur signature Date Your occupation If the	IRS ser	nt you an Identity			
		Prote	ection P	IN, enter it here			
Joint return?		II AITHICATION ENGINEER	inst.)				
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here			
your records.		(see	,	Cuon Fila, enter it here			
	Ph	one no. (816)419-6062 Email address KUMARPRASAN01@GMAIL.COM					
		eparer's name Preparer's signature Date PTIN		Check if:			
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/05/2023 *****	2703	Self-employed			
Preparer	10		ne no. (678) 965-9522				
Use Only			Firm's EIN **-**1965				