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.

	s 🗌 🤄	Single Married filing jointly	Marrie	ed filing separately (I	MFS)	Head of	housel	nold (HOI	H) [iving
Check only one box.	If vo	ou checked the MFS box, enter the na	ame of v	our spouse If you c	hecke	ed the HOH or	r OSS I	nox ente	er the		ise (QSS) name if th	e qualifying
0110 20%		son is a child but not your dependent		PITHA KONREI			. 400	50%, GITE	JI 1110	orma o	namo n un	o quamying
Your first name			Last nar		<i></i>					Your so	cial securit	y number
KENNETH	VTN	CENT	THOM	AS						***-**-8154		
		s first name and middle initial	Last nar						_	Spouse's social security number		
in joint rotain, opened o mot haire and image initial										***-**-2801		
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Α	pt. no.		_		on Campaign
4075 N I	TEM 1	BRITTON DR							- 1		ere if you,	
		ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	e	ZIP co	ode				tly, want \$3
HOFFMAN ESTATES				IL							this fund. (ow will not	Checking a
Foreign country name			Foreign province/state/county			~ ~			or refund.	0		
											You	Spouse
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a	a reward. award. or	pavn	nent for prope	erty or	services)	: or (b) sell.		
Assets		lange, gift, or otherwise dispose of a					-				Yes	⊠ No
Standard		eone can claim: You as a de		<u></u>					T			
Deduction		Spouse itemizes on a separate retur		•	alien	·						
A are /Diin da a a			050 5	A was believed						1050		
		Were born before January 2, 1	958 _	- 	ouse:						ls bli	instructions):
Dependent				(2) Social security number	/	(3) Relationsh to you	nip (4				,	,
If more	(1) ⊢	irst name Last name		Tidifibei		to you		Child to	ax cre	ait	Credit for oth	ner dependents
than four dependents,									╬		L	
see instruction	s —							L	┽		L	┽──
and check here	1 —							L	 		L	┽──
	4.0	Total amount from Form(a) W.O. b	ov 1 /oo	inaturations)				L		10	L	
Income	1a	Total amount from Form(s) W-2, b	,	,						1a	+	L9,084.
Attach Form(s)	b	Household employee wages not re		1.7						1b 1c	+	
W-2 here. Also	c	Tip income not reported on line 1a (see instructions)							1d			
attach Forms W-2G and	d e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1e			
1099-R if tax	f	Taxable dependent care benefits from Form 2441, line 26							1f	1		
was withheld.	-	Wages from Form 8919, line 6.			•					1g	1	
If you did not get a Form	g h	Other earned income (see instruct								1h	+	0.
W-2, see	i	Nontaxable combat pay election (s								• • • • • • • • • • • • • • • • • • • •		
instructions.	z	Add lines 1a through 1h	occ man	dollons)						1z	1 11	L9,084.
Attach Sch. B			2a		h Ta	xable interest	t .			2b		492.
if required.	3a		3a			rdinary divide				3b	1	
	4a		4a			axable amoun				4b	+	
Standard	5a		5a			axable amoun				5b	1	
Deduction for-	6a		6a			axable amoun				6b	1	
 Single or Married filing 	С	If you elect to use the lump-sum e		nethod, check here					. \square			
separately, \$12,950	7	Capital gain or (loss). Attach Sche		•	•	,			. \Box	7	7	
Married filing	Other income from Schedule 1, lin							8	-1	L3,000.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		06,576.
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26										
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	10	06,576.
household, \$19,400 12 Standard deduction or itemized deductions (from Sche										12		L2,950.
If you checked	13	Qualified business income deduct		•	,	5-A				13		
any box under Standard	14	Add lines 12 and 13							14	1	L2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		93,626.
SCC IIISHUCHONS.												

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	16,306.
Credits	17	Amount from Schedule 2, line 3	17	
O. Gaito	18	Add lines 16 and 17	18	16,306.
	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	16,306.
	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	16,306.
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	21,178.
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	21,178.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,872.
riorana	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	4,872.
Direct deposit?	b	Routing number * * * * * * X X X X X C Type: Checking Savings		
See instructions.	d	Account number * * * * * * * * * * * * * X X X X		
	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	below.	X No
200.900	De	signee's Phone Personal identi		
	naı			
Sign		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		
Here	Yo			nt you an Identity
Joint return?			ection P inst.)	IN, enter it here
See instructions.	Sp		e IRS se	nt your spouse an
Keep a copy for your records.			itity Prote inst.)	ection PIN, enter it here
	——Ph	one no. (408)550-3793 Email address ARPITHAREDDY111@GMAIL.COM		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/26/2023 *****	2703	Self-employed
Preparer				678)965-9522
Use Only			ı's EIN	**-***1965