E 1040 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	<b>S X S</b>	Single Married filing jointly	Marrie	d filing separately	(MFS)	Head of	househol	(HOH)		ifying survi ıse (QSS)	ving	
Check only one box.	-	u checked the MFS box, enter the nonis a child but not your dependent	-	our spouse. If you	checke	ed the HOH or	r QSS box	k, enter th			∍ qualifying	
Your first name and middle initial Last na				name						Your social security number		
RAVI TEJA NAN				ANNAPANENI						***-**-0313		
If joint return, spouse's first name and middle initial Last name									Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ins.			Apt.	no.	Preside	ntial Electio	n Campaigr	
472 E MJ		1199				Check here if you, or your						
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	ete spaces below. State						spouse if filing jointly, want \$3 to go to this fund. Checking a		
SAN JOSE				CA			95112			box below will not change		
Foreign country name			F	Foreign province/state/county			Foreign postal code your			our tax or refund.		
										You Spouse		
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a		and a constant two particles are						Yes	⊠ No	
Standard		eone can claim: You as a de										
Deduction		Spouse itemizes on a separate retur										
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	☐ Was bor	rn before	January 2	2, 1958	☐ Is blir	nd	
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip (4) C	neck the b	ox if qualif	ies for (see i	nstructions):	
If more		rst name Last name		number		to you		Child tax c	redit	Credit for oth	er dependents	
than four	3											
dependents, see instructions												
and check	s —					10	>					
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions) .					. 1a	19	9,569.	
	b	Household employee wages not reported on Form(s) W-2							. 1b			
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption bene	. 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 instructions.	i	Nontaxable combat pay election (	see instru	uctions)		<u>1</u> i						
	Z	Add lines 1a through 1h							. 1z	19	9,569.	
Attach Sch. B	2a		2a			axable interes			. 2b			
if required.	3a	The second secon	3a			rdinary divide			. 3b			
	4a		4a			axable amoun						
Standard Deduction for—	5a		5a			axable amoun			-			
Single or	6a		6a			axable amoun	t		. 6b			
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)							_			
\$12,950	7	Capital gain or (loss). Attach Sche									U U	
Married filing jointly or	8	Other income from Schedule 1, line 10							. 8		0,201.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		OT I SHIPE					. 9	18	9,368.	
surviving spouse, \$25,900	10	Adjustments to income from Sche		. 10 . 11								
Head of household,	11	Subtract line 10 from line 9. This is your adjusted gross income									9,368.	
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)									2,950.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A										
Standard Deduction,	14	Add lines 12 and 13									2,950.	
see instructions.	15	Subtract line 14 from line 11. If zel	o or less	s, enter -U This is	your <b>t</b>	axable incom	1e		. 15	1.7	6,418.	

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	36,685.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	36,685.	
	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	36,685.	
	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	36,685.	
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	38,381.	
	26	2022 estimated tax payments and amount applied from 2021 return	26		
If you have a qualifying child,	27	Earned income credit (EIC)	Y		
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	38,381.	
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	1,696.	
neiuliu	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	1,696.	
Direct deposit?	b	Routing number * * * * * * 0 6 1 4 c Type: X Checking Savings			
See instructions.	d	Account number   *   *   *   *   8   0   6   1			
	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		
	38	Estimated tax penalty (see instructions)			
Third Party	Do	you want to allow another person to discuss this return with the IRS? See			
Designee		structions	oelow.	<b>X</b> No	
		signee's Phone Personal identi	fication		
	nai		Podrana USA		
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?		SOFTWARE DEVELOPER (see	inst.)		
See instructions.	Sp			nt your spouse an	
Keep a copy for your records.			tity Prote inst.)	ection PIN, enter it here	
your rooordo.			11131.)		
		one no. (936) 232 – 6333 Email address NANNAPANENIRAVITE JA@GMAIL. COM sparer's name Preparer's signature Date PTIN		Chook if	
Paid			2762	Check if:	
Preparer	9	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/08/2023 *****		Self-employed	
<b>Use Only</b>			ne no. (678) 965-9522		
-	Fire	's FIN	**-***1965		