E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

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OMB No. 1545-0074

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

Filing Status Check only one box.		Single Married filing jointly uchecked the MFS box, enter the n		d filing separately (Nour spouse. If you c				spou	fying surv se (QSS) name if th	Ü		
		on is a child but not your dependen		,,,,,			, , , , , , ,			1,1,1,1,1,1		
Your first name and middle initial				Last name						Your social security number		
SUREKHA				TH				***-**-9914				
If joint return, s	pouse's	first name and middle initial	Last nar	name					Spouse's social security number			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.										Presidential Election Campaign		
9064 PH	DEBE	RD							ere if you,			
City, town, or post office. If you have a foreign address, also com				nplete spaces below. State					pouse if filing jointly, want \$3 go to this fund. Checking a			
FRISCO			TX			75			ox below will not change			
Foreign country name			Foreign province/state/county			Fore	Foreign postal code yo		our tax or refund.			
									You Spouse			
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a							Yes	⊠ No		
Standard		eone can claim: You as a de			e as a depende							
Deduction		Spouse itemizes on a separate return										
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	ouse: Was		fore January 2		Is bli			
Dependents	s (see	instructions):		(2) Social security		THO THE	(4) Check the bo	x if qualif	es for (see	instructions):		
If more	(1) F	rst name Last name		number	to yo	u	Child tax cre	edit	Credit for oth	ner dependents		
than four										<u></u>		
dependents, see instruction	s ——								[
and check												
here L									[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .		<u> </u>		1a	8	33,077.		
	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 benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6.				n n		1g 1h				
get a Form W-2, see	h	The state of the s	earned income (see instructions)							0.		
instructions.	i	Nontaxable combat pay election (see instr	uctions)		1i						
	Z	Add lines 1a through 1h						1z	3	33,077.		
Attach Sch. B	2a		2a		b Taxable inte			2b				
if required.	3a		3a	,	b Ordinary div			3b				
	4a		4a		b Taxable amo			4b				
Standard Deduction for—	5a		5a		b Taxable amo			5b				
Single or	6a		6a		b Taxable amo			6b				
Married filing separately,	C	If you elect to use the lump-sum election method, check here (see instructions)						1 -				
\$12,950	7						L	7		0 020		
 Married filing jointly or 	8	Other income from Schedule 1, lin Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		This is your total inc				9		-9,038.		
Qualifying surviving spouse,								10	1	74,039.		
\$25,900	10	Adjustments to income from Schedule 1, line 26							-	7.4 020		
 Head of household, 	12	Standard deduction or itemized						11		74,039.		
\$19,400 If you checked	13				,			13		12,950.		
any box under	14	Qualified business income deduction from Form 8995 or Form 8995-A							1	2 950		
Standard Deduction,	15	Add lines 12 and 13								12,950. 51,089.		
see instructions.		Subtract line 14 from line 11. If zero or less, enter -U This is your taxable income) I , UO J .		

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	9,054.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	9,054.	
	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	9,054.	
	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	9,054.	
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	10,759.	
If you have a qualifying child,	26	2022 estimated tax payments and amount applied from 2021 return	26		
	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	10,759.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,705.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,705.	
Direct deposit?	b	Routing number * * * * * 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 amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37		
	38	Estimated tax penalty (see instructions)	0.		
Third Party		you want to allow another person to discuss this return with the IRS? See			
Designee		structions	oelow.	X No	
Ü	De	signee's Phone Personal identi	fication		
-	nai	me no. number (PIN)			
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 whicl		,	
Here				-	
	YO		the IRS sent you an Identity rotection PIN, 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 records.					
		one no. (845) 667-2663 Email address SUREKHA, JATOTH1591@GMAIL, COM		Oh a ala if	
Paid		eparer's name Preparer's signature Date PTIN	0700	Check if:	
Preparer	17	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/03/2023 *****		Self-employed	
Use Only			ne no. (678) 965-9522		
	Fir	's FIN	**-***5487		