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



OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the non is a child but not your dependent	ame of y	ed filing separately (,			hold (HOH	, _	spou	fying surv se (QSS) name if th	Ü	
Your first name and middle initial				Last name						Your social security number			
SAI JASWANTH			GUDI	BANDI					0	026-47-5731			
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	instruction	ons.			Α	.pt. no.	Р	resider	itial Election	on Campaign	
14901 MILVERTON RD								Ch		heck here if you, or your			
City, town, or post office. If you have a foreign address, also cor				implete spaces below. State 2						spouse if filing jointly, want \$3 to go to this fund. Checking a			
Cleveland				ОН			441	20			this fund. (w will not		
Foreign country name			Foreign province/state/county								our tax or refund.		
										You	Spouse		
Digital		ny time during 2022, did you: (a) rec	,				•	, .	, ,		Yes	⊠ No	
Assets		ange, gift, or otherwise dispose of a		<u>_</u>			asseij	: (See IIIs	iructi	0115.)	163		
Standard Deduction		eone can claim: You as a de		•		a dependent							
Deduction		Spouse itemizes on a separate retur	ii or you	were a duar-status	alleri								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	☐ Was bor	rn befo	re Janua	y 2, 1	958	Is bli	ind	
Dependent	s (see	(see instructions):		(2) Social securit	y	(3) Relationsh	nip (4	(4) Check the box		if qualif	es for (see	instructions):	
If more	(1) Fi	rst name Last name		number		to you	Child tax cr		x cred	redit Credit for other		her dependents	
than four													
dependents, see instruction	s ——										[<u> </u>	
and check	, —												
here													
Income	1a	1a Total amount from Form(s) W-2, box 1 (see instructions)							1a	- 6	66 , 485.		
=	b	b Household employee wages not reported on Form(s) W-2							1b				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c				
attach Forms	d								1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e				
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 W-2, see		Other earned income (see instructions)							1h		0.		
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>							
	<u>z</u>	Add lines 1a through 1h							•	1z	(66,485.	
Attach Sch. B if required.	2a	· –	2a			axable interest				2b			
ii required.	3a		3a			rdinary divider				3b			
	4a		4a			axable amoun axable amoun				4b			
Standard Deduction for—	5a		5a 6a			axable amoun				5b 6b			
Single or	6a	If you elect to use the lump-sum e		nothed shock here						OD			
Married filing separately,	с 7	•		*	•	,			H	7			
\$12,950 Married filing	8	Capital gain or (loss). Attach Schedule D if required. If not required, check here				ш	8		-7 , 646.				
jointly or	9	Other income from Schedule 1, line 10								9		58,839.	
Qualifying surviving spouse,	10	Add lines 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income								10		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
\$25,900 • Head of	11	•								11	-	58 , 839.	
household,	12	Standard deduction or itemized	-						•	12	1	12,950.	
\$19,400 If you checked	13	,								13		<u>, , , , , , , , , , , , , , , , , , ,</u>	
any box under Standard	14	Add lines 12 and 13							14	1 1	12,950.		
Deduction,	15	F							15		45 , 889.		
see instructions.											<u> </u>		

Form 1040 (2022	2)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	5,710.	
Credits	17	Amount from Schedule 2, lin	17							
	18	Add lines 16 and 17	18	5,710.						
	19	Child tax credit or credit for other dependents from Schedule 8812								
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,710.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21							0.	
	24	Add lines 22 and 23. This is	your total tax					24	5,710.	
Payments	25	Federal income tax withheld								
	а	Form(s) W-2								
	b	Form(s) 1099								
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	7,412.	
.,	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26		
If you have a 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	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	7,412.	
Refund	34	If line 33 is more than line 24						34	1,702.	
	35a	Amount of line 34 you want	refunded to you	یا. If Form 8888	is attached, che	eck here	🗆	35a	1,702.	
Direct deposit?	b	Routing number X X X	XXXXX	XX	c Type:	Checking	Savings			
See instructions.	d	Account number X X X X X X X X X								
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see instructions)								
Third Party Designee		you want to allow another	person to disc	cuss this retu	n with the IRS	? See _	Complete	below.	⊠ No	
		esignee's Phone Personal identifi						tification		
	nar	ne		no.		nı	ımber (PIN)			
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com								
	Yo	ur signature	Date	F				nt you an Identity IN, enter it here		
Joint return?				,	e inst.)					
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	——Ph	one no. (636) 253-235	 6	Email address	TASMANMHRFUI L	DY2712@GMAIL	COM	•		
		eparer's name	Preparer's signat		OTTOMITM THINDD	Date	PTIN		Check if:	
Paid		•			הוופתם המו.ו.מי			32703	Self-employed	
Preparer									(678) 965-9522	
Use Only			Y CT E BRU	INSWICK N.	J 08816			n's EIN	88-2145487	
Co to use the				TANKE OF THE				J LIIN	Form 1040 (2022)	
GO TO WWW.Irs.go	virom	11040 for instructions and the late	ระเทเบททลับดิก.		BAA	REV 01/24/23 PR	U		Form 1040 (2022)	