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

2022	2
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OMB No. 1545-0074

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

Filing Status	S X S	Single Married filing jointly	Marrie	d filing separately	(MFS)	Head of	household (НОН)		fying survivse (QSS)	ving
Check only one box.	-	u checked the MFS box, enter the noon is a child but not your dependent	-	our spouse. If you	checke	ed the HOH or	QSS box,	enter the			qualifying
Your first name	st name and middle initial Last nam							2	Your social security number		
ADITYA F	REDDY	Y	LING	AREDDY				11	***-*	*-6301	
If joint return, s	pouse's	first name and middle initial	Last nar	ne				3	Spouse's	social secu	rity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no). I	Presiden	tial Election	Campaigr
2590 CAS	STLEE	ROCK CT							Check he	ere if you, c	or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Stat	е	ZIP code			filing jointl	
CUMMING					GA		30041			this fund. C w will not c	
Foreign country	y name		F	oreign province/state	e/count	y	Foreign pos			or refund.	3
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a		THE RESIDENCE OF THE PROPERTY OF THE PARTY O						Yes	⊠ No
Standard		eone can claim: You as a de							,	_	
Deduction		Spouse itemizes on a separate return									
		Were born before January 2, 1	958	Are blind S	oouse:	☐ Was bor	n before Ja			☐ Is blin	
Dependents				(2) Social securi	ity	(3) Relationsh			T	es for (see ir	
If more	(1) Fi	rst name Last name		number		to you	Ch	ild tax cre	dit C	Credit for othe	r dependents
than four dependents,					-						
see instruction:	s ——							_ <u> </u>		L	
and check	1 —							<u> </u>			
here]										
Income	1a	Total amount from Form(s) W-2, b			. 1				1a	11.	3,805.
Attach Form(s)	b								1b		
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d		
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e 1f		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	g	Wages from Form 8919, line 6							1g		
get a Form W-2, see	h	The same of the sa		· · ·			i		1h		0.
instructions.	i	Nontaxable combat pay election (see mstr	uctions)		<u>1</u> i			- 4-	11	2 005
A# 0 D	Z	Add lines 1a through 1h Tax-exempt interest	2a		h Ta	axable interes			1z 2b		3,805.
Attach Sch. B if required.	2a 3a		3a			rdinary divide			3b		
	4a		4a			axable amoun			4b		
Standard	5a		5a			axable amoun			5b		
Deduction for—	6a		6a			axable amoun			6b		
Single or Married filing	С			nethod check her					0.5		
separately,	7	If you elect to use the lump-sum election method, check here (see instructions) L Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
\$12,950 Married filing	8	Other income from Schedule 1, lin						–	8		9,983.
jointly or	9	Other income from Schedule 1, line 10							9		3,822.
Qualifying surviving spouse,	10	Adjustments to income from Schedule 1, line 26								1	-,
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income							10	10	3,822.
household,	12	Standard deduction or itemized deductions (from Schedule A)									2,950.
\$19,400 If you checked	13	Qualified business income deduct			,				12	1	_,
any box under Standard	14	Add lines 12 and 13							14	1	2,950.
Deduction,	15	Subtract line 14 from line 11. If ze							15		0,872.
see instructions.					-						

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	15,646.
Credits	17	Amount from Schedule 2, line 3	17	
3133113	18	Add lines 16 and 17	18	15,646.
	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	15,646.
	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	15,646.
Payments	25	Federal income tax withheld from:		
•	a	Form(s) W-2		
	b	Form(s) 1099		
	C	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	18,041.
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	18,041.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,395.
11010110	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,395.
Direct deposit?	b	Routing number ★ ★ ★ ★ ★ 0 3 6 1 c Type: ★ Checking Savings		
See instructions.	d	Account number * * * * * * 2 2 9 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 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)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee	ins	structions	below.	X No
		signee's Phone Personal ident	ification	
	naı			
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 whic		
Here				nt you an Identity
	10			IN, enter it here
Joint return?		SOFTWARE ENGINEER (see	e inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an
your records.			inst.)	ection PIN, enter it here
	Ph			
		one no. (203) 308-3130 Email address ADITYAREDDY76@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 03/08/2023 *****	2703	Self-employed
Preparer	19			(678) 965-9522
Use Only			n's EIN	**-***1965
	1.0	Till District No cools	. J LIIV	1900